### 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P96000059557

1. Entity Name

JONATHAN'S LANDING REALTY, INC.

# FILED Jan 25, 2000 8:00 am Secretary of State

01-25-2000 90042 040 \*\*\*150.00

SUMPTION FROM DRIVER PLANS BY ADDRESS STATE OF THE NUMBER PLANS BY ADDRESS STATE BY ADDRESS		<del></del>								
JUPITER PL 20498  U.S. Principal Place of Susiness  Subs. Apt. #, etc.  DO NOT WRITE IN THIS SPACE  Applied For For Additional For Residence of States Desired*  Stat	Principal Place	e of Business	Mailing Address							
Suite, Apt. 8, etc.  City & State  City & State  City & State  City & State  Country  Country	JUPITER FL 33458		JUPITER FL 33458-5713			1 1880 (1881 ) (18		1851 1865 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 12101 B1191 T	111 1 <b>00</b> 1 1 <b>95</b> 1
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Zip Country Zip Country S. Continue of Sarus Desired Sarus	Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<del></del>		DO NOT WRIT	TE IN THIS S	PACE	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent    GELFAND, MICHAEL J. ONE CLEARLAKE CENTRE 250 AUSTRALLAN AVE #1010   WEST PALM BEACH FL 33401    8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE Syvenia, lyad to creat around a registered agent and select to do so. (See criteria on back)    17. OFFICERS AND DIRECTORS   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. This composition is eligible to eatily its Intangible   18. The Advisory is the Intangible   18. The Advisory is the Intangible   18. This composition is eligible to eatily its Intangible   18. The Advisory is the Intan	City & State	9	City & State		<b>4</b> . F	El Number	NOT APPL	ICABLE	<u> </u>	•
GELFAND, MICHAEL J. ONE CLEARLAKE CENTRE 250 AUSTRALLAN AVE #1010 WEST PALM BEACH FL 33401  8. The above named entity outbritts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flonda.  SIGNATURE    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent and value in registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent, or both, in the State of Flonda.    Signava hypot or prime rums of registered agent action in the State of Flonda.    Signava hypot or prime rums of registered agent action in the State of Flonda.   Signava hypot or prime rums of registered agent, or both, in the State of Flonda.   Signava hypot or prime rums of registered agent, or both, in the State of Flonda.   Signava hypot or prime rums of registered agent action in the State of Flonda.   Signava hypot or prime rums of registered agent action in the State of Flonda.   Signava hypot or prime rums of registered agent action in the State of Flonda.   Signav	Zip Country		Zip Country		5. (	Certificate of	Status Desired*			
Sireer Address (P.O. Box Number is Not Acceptable)  Sireer Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florada.  SiGNATURE  Signature, hyeat or provide name of registerial agent and title? I spot case is the statement and elects to do so.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of changing its registered agent, or both, in the State of Florada.  Signature to purpose of Change its purpose of Changing its registered agent, or both, in the State of Florada.  Signature to purpose of Change its purpose of Changing its registered agent, or both, in the State of Florada.  Signature to purpose of Change its purpose of Changing its registered agent, or both, in the State of Florada.  Signature to purpose of Change its purpose of Change it		6. Name and Address of Current R	egistered Agent		7. N	ame and A	dress of New R	egistered A	gent	
ONE CLEARLAKE CENTRE 250 AUSTRALIAN AVE #1010 WEST PALM BEACH FL 33401  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  9. This corporation is eligible to satisfy its Inflampble Tax filing requirement and elects to do so. (See criteria on back)  11.				Name						
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information		,		CITY-ST-ZIP						
	13. I hereby o	certify that the information supplied with	this filing does not qualify for	the exemption sta	ted in Section	119.07(3)(i).	Florida Statutes.	I further cert	fy that the i	nformation

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in changed, or on an attachment with an address, with all other like empowered.