2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2000 8:00 am
Secretary of State
05-13-2000 90036 025 ***150.00

DOCUMENT # P98000024123

1. Entity Name

JACKSON TOWER LAS OLAS PROPERTIES, INC.

Principal Place of Business	Mailing Address
~~601 S. ANDREWS AVE #201~~ ~~FT. LAUDERDALE FL 33301~~	601 S. ANDREWS AVE #201 FT. LAUDERDALE FL 33301-2833

DO NOT WRITE IN THIS SPACE
65-0922989

2. Principal Place of Business	3. Mailing Address
201 Black Street	1000 Ridgeway Loop
Suite Apt. #, etc.	Suite Apt. #, etc. Suite 320
City & State Fort Lauderdale FL	City & State Memphis TN
Zip 33301 Country	Zip 38120 Country

4. FEI Number ~~APPLIED FOR~~ ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HEALY, CHARLOTTE A 184 NE 6TH AVENUE SUITE A DELRAY BEACH FL 33483	Name Street 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 office or registered agent, or both, in the State of Florida.

SIGNATURE _____ Date
Signature, type or print name of registered agent and title if applicable (NOTE: Registered Agent signature required for filing)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See order A on back) ☐	**FILE NOW!!! FEE IS $150.00** **After MAY 1, 2000 Fee will be $550.00** **Make Check Payable to Department of State**	10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Delete JACKSON, GREGORY L 601 S. ANDREWS AVE #201 FT. LAUDERDALE FL 33301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D P ☐ Delete Frank L Zeuthen JR 1000 Ridgeway Loop RD Suite 320 Memphis TN 38120	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VP ☐ Delete Robert T Komm 1000 Ridgeway Loop RD Suite 320 Memphis TN 38120	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert T. Komm V.P. 5/11/00 901-681-5181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number

CR2E113 (1/99)