2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000063763

1. Entity Name

PONTE VEDRA SQUARE, LLC



Principal Place of Business

3740 BEACH BLVD., SUITE 300 JACKSONVILLE, FL 32207

Mailing Address

3740 BEACH BLVD., SUITE 300 JACKSONVILLE, FL 32207

FILED May 09, 2007 8:00 am Secretary of State

05-09-2007 90074 001 ***350.00

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04042007 No Chg-LLC

CR2E083 (11/05)

		- \$5.0	10	A delitioned
	20-1555258			Not Applicable
4.	FEI Number			Applied For

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

DEMETREE, J.C. JR 3740 BEACH BLVD., SUITE 300 JACKSONVILLE, FL 32207

SIGNATURE:

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 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. I am familiar with, and accept the obligations of registered agent. 					
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
Filing Fee is \$50.00 Due by May 1, 2007					
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEMETREE, J C JR 3740 BEACH BLVD, SUITE 300 JACKSONVILLE, FL 32207				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT W	RITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee expowered to execute this report as required by Chapter 608, Florida Statutes.					