## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L05000089480

1. Entity Name

1616 RIVER ROAD, LLC

FILED Apr 23, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

8833 PERIMETER PARK BOULEVARD SUITE 1104 JACKSONVILLE, FL 32216

8833 PERIMETER PARK BOULEVARD SUITE 110 JACKSONVILLE, FL 32216



03142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-2642002

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ATKERSON, CHARLES F JR 8833 PERIMETER PARK BOULEVARD SUITE 1104 JACKSONVILLE, FL 32216

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<ol><li>The above named entity submits this statement for the purpose of cha the obligations of registered agent.</li></ol>	nging its registered office or registered agent, or be	oth, in the State of Florida.	I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	Hannana 175	<u> </u>
FILE NOWIII FEE IS \$138.75		05/13/08-8005	William .

After May 1, 2008 Fee will be \$538.75

## MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME C. ATKERSON .INC. STREET ADDRESS 8833 PERMETER PARK BLVD SUITE 1104 CITY-ST-ZIP JACKSONVILLE, FL 32216 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE