

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029943

FILED
Apr 30, 2008
Secretary of State

Entity Name: 208 NORTH LAURA, LLC

Current Principal Place of Business:

5200 BELFORD ROAD
SUITE 250
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

5200 BELFORD ROAD
SUITE 250
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-4536444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBERTELLI & ASSOCIATES, P.L.
330 A1A NORTH
SUITE 324
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

ALBERTELLI LAW
208 N. LAURA ST.
SUITE 900
JACKSONVILLE, FL 32202 US

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: JAMES ALBERTELLI 04/30/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JONATHAN, SAWYER D
Address: 5200 BELFORD ROAD, SUITE 250
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM () Delete
Name: JAMES, ALBERTELLI E
Address: 5200 BELFORD ROAD, SUITE 250
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM () Delete
Name: HALSEMA, JAY C
Address: 5200 BELFORD ROAD, SUITE 250
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM () Delete
Name: ALBERTELLI, GEORGE J
Address: 5200 BELFORD ROAD, SUITE 250
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM () Delete
Name: ALBERTELLI, DAVID
Address: 5200 BELFORD ROAD, SUITE 250
City-St-Zip: JACKSONVILLE, FL 32256 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GEORGE ALBERTELLI MGRM 04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date