

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000062775

**FILED  
Apr 30, 2009  
Secretary of State**

**Entity Name:** GOLDEN RULE LODESTAR, L.L.C.

**Current Principal Place of Business:**

50 N. LAURA STREET  
SUITE 2800  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

50 N. LAURA STREET  
SUITE 2800  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 20-5075659      **FEI Number Applied For** ( )      **FEI Number Not Applicable** ( )      **Certificate of Status Desired** ( )

**Name and Address of Current Registered Agent:**

GIBBS, THOMAS E  
50 N. LAURA STREET  
SUITE 2800  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** GIBBS, THOMAS E  
**Address:** 50 N. LAURA STREET, SUITE 2800  
**City-St-Zip:** JACKSONVILLE, FL 32202

**ADDITIONS/CHANGES:**

**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: THOMAS E. GIBBS      MGR      04/30/2009

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