


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000067415
 1. Entity Name
 1624 RIVER ROAD, LLC



Principal Place of Business Mailing Address
 8833 PERIMETER PARK, SUITE 1104 8833 PERIMETER PARK, SUITE 1104
 JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32216

DO NOT WRITE IN THIS SPACE



03142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5192068	Applied For Not Applicable
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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, SUITE 1104
 JACKSONVILLE, FL 32216

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000313226
 05/08/08-80007-020 143.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM C. ATKERSON INC 8833 PERIMETER PARK BLVD #1104 JACKSONVILLE, FL 32216
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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:  Charles F. Atkinson, Jr. 4/17/08 904-5642252

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #