

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081374

FILED
Mar 08, 2009
Secretary of State

Entity Name: 2828 GOLDEN ROD CIRCLE PROPERTY, LLC

Current Principal Place of Business:

2828 GOLDENROD CIRCLE W.
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

1286 ARDMORE STREET
ST. AUGUSTINE, FL 32092

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, TODD ESQ
7785 BAYMEADOWS WAY, SUITE 107
JACKSONVILLE, FL 32256 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: MGRM () Delete
Name: MORRISON, ALVER E
Address: 1286 ARDMORE STREET
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM () Delete
Name: MORRISON, BETTY L
Address: 1286 ARDMORE STREET
City-St-Zip: ST. AUGUSTINE, FL 32092

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
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: MORRISON, ALVER E. MGRM 03/08/2009

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