

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000057998

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

**Entity Name:** 152 NORTH PRAIRIE LAKES BOULEVARD, LLC

**Current Principal Place of Business:**

152 NORTH PRAIRIE LAKES BOULEVARD  
SAINT AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

**Current Mailing Address:**

3700 US HIGHWAY 1 SOUTH  
SAINT AUGUSTINE, FL 320867150 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLINS, J. RUSSELL  
3700 US HIGHWAY 1 SOUTH  
SAINT AUGUSTINE, FL 320867150 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: COLLINS, J. RUSSELL  
Address: 3700 US HIGHWAY 1 SOUTH  
City-St-Zip: SAINT AUGUSTINE, FL 320867150 US

**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: J. RUSSELL COLLINS

MGR

04/30/2009

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