


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT# M05000006720
 1. Entity Name
 MILESTONE JACKSONVILLE LLC



Principal Place of Business 5610 WISCONSIN AVE. STE G101 CHEVY CHASE, MD 20815	Mailing Address 5610 WISCONSIN AVE. STE G101 CHEVY CHASE, MD 20815
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DO NOT WRITE IN THIS SPACE



04012008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 06-1763146	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525

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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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MILESTONE MANOR PARTNERSHIP 5610 WISCONSIN AVE., SUITE G-101 CHEVY CHASE, MD 20815
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MILESTONE, ELAINE G 5610 WISCONSIN AVE. STE G101 CHEVY CHASE, MD 20815
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KALMAR, RICHARD 380 N. VENTURA CLUB DR. ROSELLE, IL 60172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/18/08-80028-025 143.75

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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: Elaine Milestone 4/3/08
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #