

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000000201**

1. Entity Name

150 EAST THIRD STREET PROPERTY, LLC



Principal Place of Business

9099 TIMBERLIN LAKE ROAD  
JACKSONVILLE, FL 32256 US

Mailing Address

9099 TIMBERLIN LAKE ROAD  
JACKSONVILLE, FL 32256 US



03132008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-4606445

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

HEEKIN, MATTHEW M  
4540 SOUTHSIDE BOULEVARD  
SUITE 702  
JACKSONVILLE, FL 32256

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(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 MGRM  
NAME JUBRAN, EASA C  
STREET ADDRESS 9099 TIMBERLIN LAKE ROAD  
CITY-ST-ZIP JACKSONVILLE, FL 32256

TITLE MGRM  
NAME ROJICS, JULIE M  
STREET ADDRESS 3470 SANDBURG RD  
CITY-ST-ZIP JACKSONVILLE, FL 32277

TITLE MGRM  
NAME JUBRAN, JACK E  
STREET ADDRESS 899 WEST AVENUE, #9L  
CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000861724  
04/03/08-80021-008 138.75

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Easa Chin Jubran*

3-13-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #