

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000065733

Entity Name: 728 THE RESERVE, LLC

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4240 POINT LA VISTA ROAD WEST  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

4240 POINT LA VISTA ROAD WEST  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 20-3100770

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAHAJAN, SUNEEL L M.D.  
4240 POINT LA VISTA ROAD WEST  
JACKSONVILLE, FL 32207 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  
Name: MAHAJAN, SUNEEL L  
Address: 4240 POINT LA VISTA ROAD WEST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM  
Name: PATHAK, ANIL M  
Address: 8405 PAPELON WAY  
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM  
Name: SHAH, NANDU K  
Address: 12209 COTTAIL LANE  
City-St-Zip: JACKSONVILLE, FL 32223

I hereby 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: SUNEEL MAHAJAN

DR

03/15/2012

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