

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000058821

**Entity Name:** 718 LANE AVENUE NORTH, LLC

**Current Principal Place of Business:**

245 LANE AVENUE, NORTH  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

245 LANE AVENUE, NORTH  
JACKSONVILLE, FL 32254 US

**FEI Number:** 20-2555998

**Certificate of Status Desired:** No

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

COLLINS, JEFFREY H  
245 LANE AVENUE, NORTH  
JACKSONVILLE, FL 32254 US

*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

**Authorized Person(s) Detail :**

Title MGR  
Name COLLINS, JEFFREY H  
Address 1406 HENDRICKS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

Title MGR  
Name FRAZIER, W. ROBINSON  
Address 1515 RIVERSIDE AVE, STE A  
City-State-Zip: JACKSONVILLE FL 32204

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY COLLINS

**MANAGER**

**02/07/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date