## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000018295

Entity Name: JAX MEDIATION CENTER, LLC

**Current Principal Place of Business:** 

2700 UNIVERSITY BLVD WEST, STE, A-1 JACKSONVILLE, FL 32217

## **Current Mailing Address:**

2700-C UNIVERSITY BLVD. W. JACKSONVILLE, FL 32217

FEI Number: 80-0359331 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SCHUTT, DENNIS R 2700 UNIVERSITY BLVD WEST, STE. A-1 JACKSONVILLE, FL 32217 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

**FILED** Jan 21, 2013

**Secretary of State** 

CC4534851896

Authorized Person(s) Detail:

Title MGRM Title

SCHUTT, DENNIS R Name SCHMIDT, PENNY W Name

2700 UNIVERSITY BLVD WEST, STE. Address 2700 UNIVERSITY BLVD WEST, STE. Address

**MGRM** 

City-State-Zip: JACKSONVILLE FL 32217 City-State-Zip: JACKSONVILLE FL 32217

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DENNIS R. SCHUTT

**MGRM** 

01/21/2013