## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000124037

**Entity Name: JACKSONVILLE PARTNERS LLC** 

**Current Principal Place of Business:** 

29 LECOUNT PLACE

NEW ROCHELLE, NY 10801

**Current Mailing Address:** 

**PO BOX 641** 

NEW ROCHELLE. NY 10802 US

FEI Number: 36-4841360 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VCORP SERVICES, LLC 5011 SOUTH STATE ROAD 7 STE 106 DAVIE, FL 33314 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 02, 2020

**Secretary of State** 

0319378741CC

## Authorized Person(s) Detail:

Title MEMBER

Name GETLAN, RONALD

Address PO BOX 641

City-State-Zip: NEW ROCHELLE NY 10802

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: RONALD GETLAN