## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L00000002378

Address:

City-St-Zip:

Entity Name: WD JACKSONVILLE FL, LLC

C/O I REISS & SON 200 EAST 61ST ST STE 29F

NEW YORK, NY 100658576

FILED Jan 07, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** C/O I REISS & SON 200 EAST 61ST STREET, STE 29F NEW YORK, NY 100658576 **New Mailing Address: Current Mailing Address:** C/O I REISS & SON 200 EAST 61ST STREET, STE 29F NEW YORK, NY 100658576 FEI Number: 13-4088993 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SONN, TERRIG P.A. 20801 BISCAYNE BLVD #501 AVENTURA, FL 33180 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HEFFNER, LINDA Name: Name: Address: C/O I REISS & SON 200 EAST 61ST ST STE 29F Address: City-St-Zip: NEW YORK, NY 100658576 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MILLER, ROBERTA Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: LINDA HEFFNER MGRM 01/07/2009