

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
May 01, 2008  
Secretary of State**

DOCUMENT# L00000004117

Entity Name: 11700 SAN JOSE BOULEVARD, L.L.C.

**Current Principal Place of Business:**

PO BOX 56994  
JACKSONVILLE, FL 32241

**New Principal Place of Business:**

11700 SAN JOSE BLVD  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

PO BOX 56994  
JACKSONVILLE, FL 322416994

**New Mailing Address:**

FEI Number: 59-3280724      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

BOWLUS, MICHAEL ESQ.  
FORD, BOWLUS, DUSS, MORGAN, KENNEY, SAFER  
10110 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32257 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

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: HIPES, KEVIN  
Address: 105 ALDEAN DRIVE  
City-St-Zip: SANFORD, FL 32771

Title: ( ) Change ( ) Addition  
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: KEVIN HIPES

MGRM

05/01/2008

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