

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004191

Entity Name: LOWE JACKSONVILLE, L.C.

FILED
Apr 13, 2006
Secretary of State

Current Principal Place of Business:

890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 65-1086036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, JAMES I
4225 PONCE DE LEON BLVD
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

KRAMER, JAMES I
890 SOUTH DIXIE HIGHWAY
CORAL GABLES, FL 33146 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: JAMES I KRAMER

04/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KRAMER, JAMES I
Address: 4225 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KRAMER, JAMES I
Address: 890 SOUTH DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES I KRAMER

MGRM

04/13/2006

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