

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004258

FILED
Apr 26, 2004
Secretary of State

Entity Name: VAULT - I-295 II, LLC

Current Principal Place of Business:

7220 FINANCIAL WAY, SUITE 400
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7220 FINANCIAL WAY, SUITE 400
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 60-0000141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, JOHN J
7220 FINANCIAL WAY, SUITE 400
JACKSONVILLE, FL 32256

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGRM () Delete
Name: ALLEN, JOHN J
Address: 7220 FINANCIAL WAY, SUITE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: JOOS, WILLIAM J
Address: 11234 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGRM () Delete
Name: ENGLAND, JAMES E
Address: 14775 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM () Delete
Name: THIMS, ROBERT E
Address: 14775 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM () Delete
Name: MILLER, DOUGLAS C
Address: 14775 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM () Delete
Name: MATTHEWS, N. HUGHS
Address: 14775 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN J ALLEN

MGR

04/26/2004

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