

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007251

FILED  
Jan 19, 2005  
Secretary of State

Entity Name: NEPTUNE BEACH OFFICE CENTER, L.L.C.

## Current Principal Place of Business:

700 3RD STREET, STE 301  
NEPTUNE BEACH, FL 32266

## New Principal Place of Business:

700 3RD STREET  
SUITE 301  
NEPTUNE BEACH, FL 32266

## Current Mailing Address:

700 3RD STREET, STE 301  
NEPTUNE BEACH, FL 32266

## New Mailing Address:

700 3RD STREET  
SUITE 301  
NEPTUNE BEACH, FL 32266

FEI Number: 68-0499086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GLAZIER & GLAZIER, P.A.  
700 3RD STREET, STE 301  
NEPTUNE BEACH, FL 32266 US

## 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: MGR ( ) Delete  
Name: MORRELL, ALVARO F  
Address: 1201 MONUMENT RD., SUITE 300  
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGR ( ) Delete  
Name: BEARDSLEY, DALE A  
Address: 4595 LEXINGTON AVE., SUITE 100  
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR ( ) Delete  
Name: ONDREJICKA, JOHN M.D.  
Address: 1750 SELVA MARINA DR  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: MGR ( ) Delete  
Name: MESSINESE, MARK M.D.  
Address: 1795 MARSHSIDE DR  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

## 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:

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 ONDREJICKA

MGR

01/19/2005

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