## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000007496

Entity Name: GREGORY COVE, L.L.C.

FILED Jun 14, 2004 Secretary of State

Date

Current Principal Place of Business: New Principal Place of Business:

2572 ATLANTIC BLVD. JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

2572 ATLANTIC BLVD. JACKSONVILLE, FL 32207

FEI Number: 04-3648535 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:

LAMM, MARY-PARKER 2572 ATLANTIC BLVD. JACKSONVILLE, FL 32207 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

## **MANAGING MEMBERS/MEMBERS:**

ADDITIONS/CHANGES:

 Title:
 P
 ( ) Delete
 Title:
 MGR
 (X) Change ( ) Addition

 Name:
 DODSON, PATRICIA
 Name:
 DODSON, PATRICIA

 Address:
 223 E BAY ST., 8TH FLOOR
 Address:
 223 E BAY ST., 8TH FLOOR

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:
 JACKSONVILLE, FL 32202

 Name:
 SMITH, BARNEY
 Name:

 Address:
 ONE SLEIMAN PARKWAY E270
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BRYANT, MICHAEL
 Name:

 Address:
 1131 N LAURA ST
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 JACKSON, DARRYL
 Name:

 Address:
 101 EAST UNION ST
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 LAMM, MARY - PARKER
 Name:

 Address:
 2572 ATLANTIC BLVD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32207
 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: PATRICIA DOSON PRES 06/14/2004