

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018175

Entity Name: COLLEGE PLACE, LLC

FILED  
May 08, 2008  
Secretary of State

**Current Principal Place of Business:**

2315 BEACH BLVD.  
203  
JACKSONVILLE BEACH, FL 32250 US

**New Principal Place of Business:**

**Current Mailing Address:**

2315 BEACH BLVD  
STE 203  
JACKSONVILLE BEACH, FL 32250 US

**New Mailing Address:**

FEI Number: 11-3668200      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:**

SMITH, HOWARD J  
8810 GOODBY'S EXECUTIVE DRIVE  
SUITE C  
JACKSONVILLE, FL 32217 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: WOODBURN, HENRY P III  
Address: 2315 BEACH BLVD #203  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGR ( ) Delete  
Name: DICKINSON, FRANKLIN B MEMBER  
Address: 60 A N. ROSCOE BLVD  
City-St-Zip: PONTE VEDRA, FL 32082

**ADDITIONS/CHANGES:**

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 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: FRANKLIN DICKINSON

MGR

05/08/2008

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