2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L02000024404

1. Entity Name

NORTHSTAR OF JACKSONVILLE, L.L.C.



Principal Place of Business

13171 ATLANTIC BLVD.

STE 400

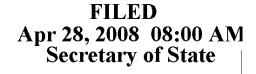
JACKSONVILLE, FL 32225

Mailing Address

13171 ATLANTIC BLVD.

STE 400

JACKSONVILLE, FL 32225





01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 42-1558252 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

REGISTER, WILLIAM P 13171 ATLANTIC BLVD. STE 400 JACKSONVILLE, FL 32225

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE !S \$138.75 After May 1, 2008 Fee will be \$538.75

A44440400 15140500 1144440500	
9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY+ST+ZIP	MGR REGISTER, WILLIAM P 13171 ATLANTIC BLVD STE 400 JACKSONVILLE, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Dayome Phone #