

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90034 050 ****50.00

DOCUMENT # L02000035218

1. Entity Name
THIRTY-SEVEN FIFTY I, LLC



Principal Place of Business

1515 RIVERSIDE AVE 3824 Better Cr
STE. A
JACKSONVILLE, FL 32204
32210

Mailing Address

1515 RIVERSIDE AVE 3824 Better Cr.
STE. A
JACKSONVILLE, FL 32204
32210



03152006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1166716

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUSHING, ROBERT K
1515 RIVERSIDE AVE 3824 Better Cr
STE. A
JACKSONVILLE, FL 32204
32210

**DO NOT WRITE
IN THIS SPACE**

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] ROBERT K RUSHING

4/25/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME RUSHING, ROBERT K
STREET ADDRESS 1515 RIVERSIDE AVE STE A 3824 Better Cr
CITY-ST-ZIP JACKSONVILLE, FL 32204 Jax FL 32210

TITLE MGR
NAME SHANE, BRIAN R
STREET ADDRESS 5089 MANDAVILLA BLVD
CITY-ST-ZIP GULF BREEZE, FL 32563

TITLE MGR
NAME HALL, MICHAEL R
STREET ADDRESS 1131 TIGER TRACE BLVD
CITY-ST-ZIP GULF BREEZE, FL 32563

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

[Signature] ROBERT RUSHING

4/25/06

904 476-4076

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

Date

Daytime Phone #