

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000016690

Entity Name: 5061 SHAWLAND ROAD, L.L.C.

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

300 EAST STATE ST.  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

300 EAST STATE ST.  
SUITE G  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

300 EAST STATE ST.  
JACKSONVILLE, FL 32202

**New Mailing Address:**

300 EAST STATE ST.  
SUITE G  
JACKSONVILLE, FL 32202

FEI Number: 42-1590523

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EASTON, SAMUEL M  
300 E. STATE STREET  
SUITE G  
JACKSONVILLE, FL 32202 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: MGRM  
Name: EASTON, SAMUEL M  
Address: 300 E STATE ST  
City-St-Zip: JACKSONVILLE, FL 32202

I hereby 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: SAM EASTON

MGR

01/06/2012

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