

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000016962

FILED
Aug 11, 2008
Secretary of State**Entity Name:** BAINBRIDGE MANAGEMENT JACKSONVILLE LLC**Current Principal Place of Business:**12765 WEST FOREST HILL BLVD., STE. 1307
WELLINGTON, FL 33414**New Principal Place of Business:****Current Mailing Address:**12765 WEST FOREST HILL BLVD., STE. 1307
WELLINGTON, FL 33414**New Mailing Address:****FEI Number:** 45-0514308**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVID J. POWERS, PA
7777 GLADES RD., STE. 300
BOCA RATON, FL 33434 US**Name and Address of New Registered Agent:**JEFFREY A. DEUTCH, PA
7777 GLADES RD., STE. 300
BOCA RATON, FL 33434 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: JEFFREY A. DEUTCH, PA

08/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: D () Delete
Name: SCHECHTER, RICHARD A
Address: 12791 W. FOREST HILL BLVD. BS
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Delete
Name: KEADY, THOMAS
Address: 12791 W. FOREST HILL BLVD. BS
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RAS MANAGER, LLC,
Address: 12765 WEST FOREST HILL BLVD. STE 1307
City-St-Zip: WELLINGTON, FL 33414

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: RAS MANAGER, LLC

MGR

08/11/2008

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