

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018116

Entity Name: SOUTHPOINT OFFICE, LLC

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6890 BELFORT OAKS PLACE  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

6890 BELFORT OAKS PLACE  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

SIDNEY S. SIMMONS, II, ATTORNEY AT LAW  
1050 RIVERSIDE AVENUE  
JACKSONVILLE, FL 32204 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  
Name: WARREN, SCOTT D  
Address: 6890 BELFORT OAKS PLACE  
City-St-Zip: JACKSONVILLE, FL 32216

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: SCOTT WARREN, MD

MGR

03/21/2012

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