

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037797

**FILED**  
**Apr 27, 2009**  
**Secretary of State**

**Entity Name:** EXPRESSWAY JACKSONVILLE, L.L.C.

**Current Principal Place of Business:**

3733 W. UNIVERSITY BLVD., STE. 115-A  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

3733 W. UNIVERSITY BLVD., W STE. 115-A  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

3733 W. UNIVERSITY BLVD., STE. 115-A  
JACKSONVILLE, FL 32217

**New Mailing Address:**

3733 W. UNIVERSITY BLVD., W STE. 115-A  
JACKSONVILLE, FL 32217

**FEI Number:** 20-0274474

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHNEIDER, MICHAEL N  
5150 BELFORT RD., BLDG. 100  
JACKSONVILLE, FL 32256 US

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

HELMING, DONNA  
3733 UNIVERSITY BLVD W STE 115-A  
JACKSONVILLE, FL 32217 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:** DONNA HELMING

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** SEGOVIA VENTRUES, LTD.  
**Address:** 3733 W. UNIVERSITY BLVD., STE. 115-A  
**City-St-Zip:** JACKSONVILLE, FL 32217

**ADDITIONS/CHANGES:**

**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:** DONNA HELMING

MGR

04/27/2009

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