

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90430 014 ****50.00

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1. Entity Name
MAYFLOWER STREET PROPERTIES, L.C.



Principal Place of Business

1904 SAN MARCO BLVD.
JACKSONVILLE, FL 32207

Mailing Address

1904 SAN MARCO BLVD.
JACKSONVILLE, FL 32207

20011163



02062006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-4606797

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SLAGLE, SUSAN ESQ.
1201 SAN AMARO ROAD
JACKSONVILLE, FL 32207

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

(NOTE: Registered Agent signature required when remaining)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE : MGRM
NAME : FOSTER, PAULA C.
STREET ADDRESS : 1914 SAN MARCO BLD #4
CITY-ST-ZIP : JACKSONVILLE, FL 32207

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

Date

Daytime Phone #