

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000057369

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: 12K LLC

## Current Principal Place of Business:

2022 HENDRICKS AVENUE  
200  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

2022 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

## Current Mailing Address:

2022 HENDRICKS AVENUE  
200  
JACKSONVILLE, FL 32207

## New Mailing Address:

2022 HENDRICKS AVENUE  
JACKSONVILLE, FL 32207

FEI Number: 87-0720961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLACKBURN & COMPANY, L.C.  
5150 BELFORT ROAD SOUTH  
BLDG 500  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

MASON IV, WILLIAM M  
2022 HENDRICKS AVE.  
JACKSONVILLE, FL 32207 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: W M MASON IV

01/07/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MASON, RAYMOND K SR.  
Address: 2022 HENDRICKS AVENUE, SUITE 200  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGR ( ) Delete  
Name: PRICHETT, ANNETTE  
Address: 2022 HENDRICKS AVE.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR ( ) Delete  
Name: SALEN, SHERRIE  
Address: 2022 HENDRICKS AVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR (X) Delete  
Name: STEUERT, RAYMOND M  
Address: 2358 RIVERSIDE AVE UNIT 902  
City-St-Zip: JACKSONVILLE, FL 32204

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MASON, RAYMOND K SR.  
Address: 2022 HENDRICKS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RAYMOND K. MASON

MGRM

01/07/2008

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