

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005949

FILED  
Jan 21, 2008  
Secretary of State

Entity Name: JACKSONVILLE REAL ESTATE SERVICES, LLC

**Current Principal Place of Business:**

3925 SHADY LANE  
JACKSONVILLE, FL 32277 US

**New Principal Place of Business:**

**Current Mailing Address:**

3925 SHADY LANE  
JACKSONVILLE, FL 32277 US

**New Mailing Address:**

FEI Number: 20-0634668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIPPO, MICHAEL F  
3925 SHADY LANE  
JACKSONVILLE, FL 32277 US

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

ALL FLORIDA FIRM INC  
813 DELTONA BLVD  
SUITE A  
DELTONA, FL 32725 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: DIELMA Z. VELOZ

01/21/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LIPPO, MICHAEL F  
Address: 3925 SHADY LANE  
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: D ( ) Change (X) Addition  
Name: LIPPO, JOSEPH W  
Address: 3925 SDADY LANE  
City-St-Zip: JACKSONVILLE, FL 32277 US

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: MICHAEL F. LIPPO

P

01/21/2008

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