2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000014721

1. Entity Name

JACKSONVILLE VICTORIA SQUARE, LLC



FILED Apr 04, 2008 08:00 A Secretary of State

Principal Place of Business

501 WASHINGTON STREET C/O YALE REALTY SERVICES CORP. PLEASANTVILLE, NY 10570 Mailing Address

501 WASHINGTON STREET C/O YALE REALTY SERVICES CORP. PLEASANTVILLE, NY 10570



01172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-2698399		Not Applicable
5. Certificate of Status Desired	\$5.00 /	

DO NOT WRITE IN THIS SPACE

	6. Name and Address of Current Registered Agent			
515 E. PAR	L CORPORATE RESEARCH, LTD., INC. RK AVE. SSEE, FL 32301		DO NOT WRITE	
TALLAMAS	55EE, FL 32301	IN T	THIS SPACE	
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	named entity submits this statement for the purpose of char	iging its registered office or registered agent, or bo	th, in the State of Florida I am familiar with, and accept	
the obligat	ions of registered agent.			
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
			U00000881464	
	: NOW!!! FEE IS \$138.75 ; 1, 2008 Fee will be \$538.75		04/16/03-80001-024 138.75	
Arter may	7, 2000 Fee Will De \$330.73			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	PAPRIN, YALE I		•	
STREET ADDRESS	501 WASHINGTON STREET			
CITY - ST - ZIP	PLEASANTVILLE, NY 10570	•	,	
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11. I hereby certify that the information supplied with the filing does not quite for executive combined in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true app accurate and that my signature shall be at the same seal offect 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: ___/

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #