

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000018352

FILED
Mar 04, 2009
Secretary of State**Entity Name:** MCAFEE JAX BEACH, LLC**Current Principal Place of Business:**233 6TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 US**New Principal Place of Business:****Current Mailing Address:**233 6TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 US**New Mailing Address:****FEI Number:** 20-0925586**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CONTEGA BUSINESS SERVICES, LLC
ONE INDEPENDENT DRIVE
SUITE 1200
JACKSONVILLE, FL 32202 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGR () Delete
Name: MCAFEE, ROBERT S
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US**Title:** MGR () Delete
Name: MCAFEE, ANN C
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US**Title:** MGR () Delete
Name: MCAFEE, MATTHEW S
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US**Title:** MGR () Delete
Name: MCAFEE, MICHAEL A
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US**Title:** MGR () Delete
Name: MILLER, NATHAN
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US**Title:** VP () Delete
Name: MORRIS, JR., RICHARD M
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGR (X) Change () Addition
Name: MORRIS, JR., RICHARD M
Address: 233 6TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: ROBERT S. MCAFEE

MGR

03/04/2009

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