

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031140

Entity Name: LENOIR AVENUE, LLC

FILED
Jul 15, 2005
Secretary of State

Current Principal Place of Business:

5150 PALM VALLEY ROAD, SUITE 200
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

5150 PALM VALLEY ROAD, SUITE 200
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-1031312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PATTERSON, BOND & LARSHAW, P.A.
3010 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZYSKI, JERRY
Address: 5150 PALM VALLEY ROAD, SUITE 200
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: LOWERY BAKER, CHERIE
Address: 3545-1 ST. JOHNS BLUFF ROAD, SOUTH PNB101
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES:

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 for the exemption stated in Section 119.07(3)(i), 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: JERRY ZYSKI

MGR

07/15/2005

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