

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000031272

**FILED**  
**May 04, 2010**  
**Secretary of State**

**Entity Name:** SALISBURY ROAD CONDOMINIUM JV4, LLC

**Current Principal Place of Business:**

1409 KINGSLEY AVE., BLDG. 2  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2426  
ORANGE PARK, FL 32067

**New Mailing Address:**

**FEI Number:** 20-1103370      **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:**

MUYRES, DAVID J  
2412 STOCKTON DRIVE  
FLEMING ISLAND, FL 32003      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  
**Name:** ARMENTROUT, BILL  
**Address:** 1117 BIMINI RD  
**City-St-Zip:** JACKSONVILLE, FL 32216

**Title:** MGR  
**Name:** MUYRES, DAVID J  
**Address:** 2412 STOCKTON DR  
**City-St-Zip:** FLEMING ISLAND, FL 32003

**Title:** MGR  
**Name:** VAN WINKEL, ROBERT  
**Address:** 13765 HARBOR CREEK PL  
**City-St-Zip:** JACKSONVILLE, FL 32244

**Title:** MGR  
**Name:** VALBUENA, JULIAN  
**Address:** 4503 WISPERING INLET  
**City-St-Zip:** JACKSONVILLE, FL 32277

I hereby 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:** DAVID J MUYRES

MGR

05/04/2010

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