

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000031272

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

4237 SALISBURY ROAD  
SUITE 409  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

4237 SALISBURY ROAD  
SUITE 409  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 20-1103370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUYRES, DAVID J  
2412 STOCKTON DRIVE  
FLEMING ISLAND, FL 32003 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:** MGRM  
**Name:** ARMENTROUT, WILLIAM F JR  
**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:** WILLIAM F. ARMENTROUT, JR.

MGRM

04/27/2012

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