

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094126

FILED
Mar 14, 2009
Secretary of State

Entity Name: ANTHONY JACKSONVILLE LLC

Current Principal Place of Business:

1072 TWIN BRANCH LANE
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1072 TWIN BRANCH LANE
WESTON, FL 33326

New Mailing Address:

FEI Number: 42-1657356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRCA, ROGER
1072 TWIN BRANCH LANE
WESTON, FL 33326 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 () Delete
Name: TRCA, ROGER
Address: 1072 TWIN BRANCH LANE
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: SCHOENBERG, LEE
Address: 4800 SW 64TH AVE, C-105
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SCHOENBERG, LEE
Address: 6160 SW 42ND COURT
City-St-Zip: DAVIE, FL 33314

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: ROGER TRCA

MGRM

03/14/2009

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