



**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000004920 1. Entity Name SAN JOSE PARTNERS, LLC	
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Principal Place of Business 3410 KORI ROAD JACKSONVILLE, FL 32257 US	Mailing Address 3410 KORI ROAD JACKSONVILLE, FL 32257 US
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DO NOT WRITE IN THIS SPACE



02202008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2223996	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**JOOST, STEPHEN
9095 BARNSTAPLE LANE
JACKSONVILLE, FL 32257**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM SORENSEN, ROBIN O 3410 KORI ROAD JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR SORENSEN, CHRIS 3410 KORI ROAD JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR HARRIS, KELLY 3410 KORI ROAD JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR JOOST, STEPHEN 3410 KORI ROAD JACKSONVILLE, FL 32257
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U00000868425
04/09/08-80006-024 138.75

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes; I further certify that the information indicated on this report is true and accurate and that my 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:  **2/25/08 (904) 884-8300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #