

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016882

FILED
Apr 24, 2007
Secretary of State

Entity Name: CAMBRIDGE REALTY OF JACKSONVILLE, LLC

Current Principal Place of Business:

644 CESERY BLVD.
SUITE 320
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

644 CESERY BLVD.
SUITE 320
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 20-2368606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

CLIFTON, SAMUELS R
1856 COMMODORE POINT DR
ORANGE PARK, 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: CLIFTON SAMUELS

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAMUELS, CLIFTON R
Address: 644 CESERY BLVD., SUITE 320
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGR () Delete
Name: SAMUELS, MAXIENNE
Address: 644 CESERY BLVD., SUITE 320
City-St-Zip: JACKSONVILLE, FL 32211

Title: S () Delete
Name: SAMUELS, MAXIENNE
Address: 644 CESERY BLVD., SUITE 320
City-St-Zip: JACKSONVILLE, FL 32211

Title: T () Delete
Name: SAMUELS, CLIFTON R
Address: 644 CESERY BLVD., SUITE 320
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES:

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

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

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 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: MAXIENNE SAMUELS

MGR

04/24/2007

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