


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90073 029 ***138.75

DOCUMENT # L05000029381		
1. Entity Name FRANCIS ROAD, LLC		

Principal Place of Business 4181 SOUTHPOINT DR. E. SUITE #400 JACKSONVILLE, FL 32216	Mailing Address 4181 SOUTHPOINT DR. E. SUITE #400 JACKSONVILLE, FL 32216
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01182008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2575992	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STONEBURNER BERRY & SIMMONS, P.A.
 841 PRUDENTIAL DRIVE, SUITE 1400
 JACKSONVILLE, FL 32207

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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 LEWIS, MURRAY P 4181 SOUTHPOINT DR. E., STE.#400 JACKSONVILLE, FL 32216
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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: Murray P. Lewis Date: 2-14-08 Daytime Phone #: 904-296-0901

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