

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000029381

FILED  
Mar 21, 2012  
Secretary of State

Entity Name: FRANCIS ROAD, LLC

**Current Principal Place of Business:**

4181 SOUTHPPOINT DR. E.  
SUITE #400  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

6890 BELFORT OAKS PLACE  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

4181 SOUTHPPOINT DR. E.  
SUITE #400  
JACKSONVILLE, FL 32216

**New Mailing Address:**

6890 BELFORT OAKS PLACE  
JACKSONVILLE, FL 32216

FEI Number: 20-2575992

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIDNEY SIMMONS, P.A.  
1050 RIVERSIDE AVE.  
JACKSONVILLE, FL 32204 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: WARREN, SCOTT D MD  
Address: 6890 BELFORT OAKS PLACE  
City-St-Zip: JACKSONVILLE, FL 32216

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: SCOTT WARREN, MD

MGRM

03/21/2012

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