2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030395

Entity Name: JACKSON SQUARE AT THE UNIVERSITY LLC

FILED Jaņ 06, 2<u>00</u>9 Secretary of State

US

Current Principal Place of Business: New Principal Place of Business:

821 NW 13TH STREET 1320 NW 3RD AVE

SUITE C # 206

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32603 US

Current Mailing Address: New Mailing Address:

821 NW 13TH STREET 1320 NW 3RD AVE

SUITE C #206 GAINESVILLE, FL 32601 US GAINESVILLE, FL 32603

FEI Number: 20-2578737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GRAVOIS, MICHAEL GRAVOIS, MICHAEL 821 NW 13TH STREET 1320 NW 3RD AVE SUITE C # 206

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32603 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:

01/06/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRN () Delete Title: () Change () Addition

GRAVOIS, MICHAEL Name: Name: Address: 2085 NW 186TH LANE Address: City-St-Zip: CITRA, FL 32113 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: FORREST, ERIC Name: Address: 1706 SW 35TH PL Address: City-St-Zip: GAINESVILLE, FL 32608 US City-St-Zip:

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: MICHAEL GRAVOIS **MGRM** 01/06/2009