

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000034572

1. Entity Name
GEORGETOWN COMMERCIAL VENTURE, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY 23 PM 4:41

Principal Place of Business
12443 SAN JOSE BLVD., SUITE 1002
JACKSONVILLE, FL 32223

Mailing Address
12443 SAN JOSE BLVD., SUITE 1002
JACKSONVILLE, FL 32223



04222008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2653036

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRECKER, CHARLES
200 E LAS OLAS BLVD
PENTHOUSE A
FORT LAUDERDALE, FL 33301

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(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 MGR
NAME JOYCE DEVELOPMENT GROUP, INC.
STREET ADDRESS 12443 SAN JOSE BLVD., SUITE 1002
CITY-ST-ZIP JACKSONVILLE, FL 32223

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

900130740769
06/04/08--01034--007 **705.00

**DO NOT WRITE
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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04/28/08

Date

Daytime Phone # _____

5/23/08