

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000034932

FILED
Feb 26, 2012
Secretary of State

Entity Name: LOFTON POINTE CENTER, LLC

Current Principal Place of Business:

7849 JAMES ISLAND WAY
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17833
JACKSONVILLE, FL 32245

New Mailing Address:

FEI Number: 20-2717937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRANIE, CHRISTOPHER
7849 JAMES ISLAND WAY
JACKSONVILLE, FL 32256 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: MGR
Name: TREVETT, HARRY R
Address: 7849 JAMES ISLAND WAY
City-St-Zip: JACKSONVILLE, FL 32256

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: HARRY R. TREVETT

MGR

02/26/2012

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