

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90022 004 ****50.00

DOCUMENT # L05000046814

1. Entity Name
ALEXANDER PROPERTY, LLC



Principal Place of Business
135 SECOND AVENUE, NORTH
SUITE 2
JACKSONVILLE BEACH, FL 32250 US

Mailing Address
135 SECOND AVENUE, NORTH
SUITE 2
JACKSONVILLE BEACH, FL 32250 US

20025297



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
Suite 2

Suite, Apt. #, etc.
Suite 2

03222006 Chg-LLC CR2E083 (11/05)

City & State

City & State

4. FEI Number
20-3028491

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOWARD, DENNIS L
1506 PRUDENTIAL DRIVE
SUITE 209
JACKSONVILLE, FL 32207

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
ALEXANDER, JAMES M
135 SECOND AVENUE NORTH
JACKSONVILLE BEACH, FL 32207

☐ Delete

TITLE
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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:

James M. Alexander
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/30/06 904/02 7436
Date Daytime Phone #