

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90071 048 ****50.00

DOCUMENT # L05000089422

1. Entity Name
ST. JOHNS 210 INVESTORS, LLC



Principal Place of Business
**60 OCEAN BLVD
SUITE 15
ATLANTIC BEACH, FL 32233**

Mailing Address
**2532 DUPONT DRIVE
IRVINE, CA 92612**

DO NOT WRITE IN THIS SPACE



04192007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
01-0844190

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**COE, BRAD
60 OCEAN BLVD
SUITE 15
ATLANTIC BEACH, FL 32233**

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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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
COX, WILLIAM J
2532 DUPONT DRIVE
IRVINE, CA 92612**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
KAPLAN, KENNETH M
2532 DUPONT DRIVE
IRVINE, CA 92612**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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: _____

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

4/18/07

Date

(949) 852-0634

Daytime Phone #