## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000094518

Entity Name: PEACOCK OFFICE, LLC

Address:

City-St-Zip:

3890 HABERSHAM FOREST DRIVE

JACKSONVILLE, FL 32223 US

FILED Apr 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12058 SAN JOSE BOULEVARD SUITE 604 JACKSONVILLE, FL 32223 **Current Mailing Address: New Mailing Address:** 3890 HABERSHAM FOREST DRIVE JACKSONVILLE, FL 32223 FEI Number: 20-4419844 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: PEACOCK, MARSHA F 3890 HABÉRSHAM FOREST DRIVE JACKSONVILLE, FL 32223 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: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition PEACOCK, BYRON E Name: Name: Address: 3890 HABERSHAM FOREST DRIVE Address: City-St-Zip: JACKSONVILLE, FL 32223 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PEACOCK, MARSHA F Name:

Address:

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: MARSHA PEACOCK MGRM 04/28/2008