

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000094518

Entity Name: PEACOCK OFFICE, LLC

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

12058 SAN JOSE BOULEVARD  
SUITE 604  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

12058 SAN JOSE BOULEVARD  
SUITE 604  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: 20-4419844

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEACOCK, MARSHA F  
3890 HABERSHAM FOREST DRIVE  
JACKSONVILLE, FL 32223 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: MGRM  
Name: PEACOCK FAMILY 2, LLC  
Address: 3890 HABERSHAM FOREST DRIVE  
City-St-Zip: JACKSONVILLE, FL 32223

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: PEACOCK FAMILY 2 LLC

MGRM

03/29/2011

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