

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109827

FILED  
Apr 26, 2011  
Secretary of State

Entity Name: DICKINSON 5143 UNIVERSITY, LLC

## Current Principal Place of Business:

C/O WALTER D. DICKSON  
ONE INDEPENDENT DRIVE, SUITE 2401  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

WALTER DICKINSON  
5187 DIXIE LANDING DR  
JACKSONVILLE, FL 32224

## Current Mailing Address:

C/O WALTER D. DICKSON  
ONE INDEPENDENT DRIVE, SUITE 2401  
JACKSONVILLE, FL 32202

## New Mailing Address:

WALTER DICKINSON  
5187 DIXIE LANDING DR  
JACKSONVILLE, FL 32224

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DICKINSON, WALTER D  
ONE INDEPENDENT DRIVE, SUITE 2401  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

DICKINSON, WALTER D  
5187 DIXIE LANDING DR  
JACKSONVILLE, FL 32224 US

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:

04/26/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: DICKINSON, WALTER D  
Address: 5187 DIXIE LANDING DR  
City-St-Zip: JACKSONVILLE, FL 32224

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: WALTER D DICKINSON

MGR

04/26/2011

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