

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112833

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** THE MARSHALL JACKSON REALTY GROUP, LLC

**Current Principal Place of Business:**

1221 BRICKELL AVENUE  
9TH FLOOR  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1221 BRICKELL AVENUE  
9TH FLOOR  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 11-3763534      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JACKSON, ANTHONY L MGRM  
1221 BRICKELL AVENUE  
9TH FLOOR  
MIAMI, FL 33131 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: MR. ( ) Delete  
Name: MOSLEY, MARSHALL MGR  
Address: 501 NE 38TH STREET  
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: MR. ( ) Delete  
Name: JACKSON, ANTHONY L MGRM  
Address: 8760 CLUB ESTATES WAY  
City-St-Zip: LAKE WORTH, FL 33467 US

**ADDITIONS/CHANGES:**

Title: MR. (X) Change ( ) Addition  
Name: MOSLEY, MARSHALL MGR  
Address: 2920 NW 9TH STREET  
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: ( ) Change ( ) Addition  
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: MARSHALL MOSLEY

MGR

04/17/2009

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