
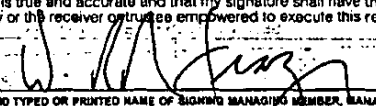


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

2/2

FILED
Mar 17, 2006 8:00 am
Secretary of State

02-27-2006 90420 028 ****50.00

DOCUMENT # L05000118112					
1. Entity Name 1515A RIVERSIDE AVENUE, LLC					
Principal Place of Business 1515 RIVERSIDE AVENUE, SUITE A JACKSONVILLE, FL 32204		Mailing Address 1515 RIVERSIDE AVENUE, SUITE A JACKSONVILLE, FL 32204			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2056064	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent FRAZIER, W. ROBINSON 1515 RIVERSIDE AVENUE, SUITE A JACKSONVILLE, FL 32204			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2008		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE MANAGER <input type="checkbox"/> Delete NAME W. ROBINSON FRAZIER STREET ADDRESS 1515 RIVERSIDE AVENUE - SUITE A CITY- ST- ZIP JACKSONVILLE, FLORIDA 32204			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY- ST- ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY- ST- ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY- ST- ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY- ST- ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY- ST- ZIP		
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TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY- ST- ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY- ST- ZIP		
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: 			2-15-2006 (904) 353-5616		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE: W. Robinson Frazier Daytime Phone #					



ATTACHMENT
30002736

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2006

1515A RIVERSIDE AVENUE, LLC
1515 RIVERSIDE AVENUE, SUITE A
JACKSONVILLE, FL 32204

Subject: 1515A RIVERSIDE AVENUE, LLC

Reference Number: L05000118112

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION