

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr. 21, 2008 08:00 A.
Secretary of State

DOCUMENT # L06000003570

1. Entity Name
RODGERS ARCHITECTS, LLC



Principal Place of Business

**10175 FORTUNE PKWY
SUITE 1105
JACKSONVILLE, FL 32256**

Mailing Address

**10175 FORTUNE PKWY
SUITE 1105
JACKSONVILLE, FL 32256**



01042008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4082978

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WATSON, TODD
7785 BAYMEADOWS WAY SUITE 107
JACKSONVILLE, FL 32256**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

000000910886
05/07/08-80018-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	RODGERS, DARRYL
STREET ADDRESS	10175 FORTUNE PKWY SUITE 1105
CITY-ST-ZIP	JACKSONVILLE, FL 32256

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IN THIS SPACE**

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 _____

4/16/08

904-519-8018