## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011908

Entity Name: N7236U, LLC

FILED May 02, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9995 GATE PARKWAY 9995 GATE PARKWAY NORTH JACKSONVILLE, FL 32246 LIS

SUITE 250

JACKSONVILLE, FL 32246

**Current Mailing Address:** New Mailing Address:

9995 GATE PARKWAY 9995 GATE PARKWAY NORTH

JACKSONVILLE, FL 32246 US SUITE 250

JACKSONVILLE, FL 32246

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

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

INTREPID REGISTERED AGENT SERVICES, LLC CONTEGA BUSINESS SERVICES, LLC

ONE INDEPENDENT DRIVE MATT MCAFFEE

1 INDEPENDEND DRIVE, SUITE 1200 SUITE 1200

JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 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.

ADDITIONS/CHANGES:

SIGNATURE: CHRISTIAN M. COX, VP 05/02/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete (X) Change ( ) Addition

CRONK, JOE CRONK, JOE Name: Name: 124 DIEGO ISLAND COURT Address: 124 DIEGO ISLAND COURT Address: City-St-Zip: ST. AUGUSTINE, FL 32095 US City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: MGRM () Delete Title: MGR (X) Change ( ) Addition MACLEOD, DEBORAH E Name: MACLEOD, DEBORAH E Name: Address: 4273 VENETIA BOULEVARD Address: 4273 VENETIA BOULEVARD City-St-Zip: JACKSONVILLE, FL 32210 US City-St-Zip: JACKSONVILLE, FL 32210 US

Title: MGRM () Delete Title: MGR (X) Change ( ) Addition

MCAFEE, MICHAEL A Name: MCAFEE, MICHAEL A Name: 527 LEMASTER DRIVE Address: 527 LEMASTER DRIVE Address:

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

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: MICHAEL A. MCAFEE 05/02/2007