

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000020149

FILED
Jul 17, 2007
Secretary of State

Entity Name: SAN JUAN GARDENS LLC

Current Principal Place of Business:

6511 SAN JUAN AVE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

8656 LEM TURNER RD
JACKSONVILLE, FL 32208 US

Current Mailing Address:

3419 VOLLEY CT
JACKSONVILLE, FL 32277

New Mailing Address:

8643 1ST STREET
JACKSONVILLE, FL 32208 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () 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:

RUSSELL, CHARMAINE
3419 VOLLEY CT
JACKSONVILLE, FL 32277 US

Name and Address of New Registered Agent:

RUSSELL, CHARMAINE
8643 1ST STREET
JACKSONVILLE, FL 32208 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:

07/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ELDRIDGE, ROLANDA
Address: 5521 LAKE CYRUS LANE
City-St-Zip: HOOVER, AL 35244

Title: MGRM () Delete
Name: ELDRIDGE, MAURICE
Address: 5521 LAKE CYRUS LANE
City-St-Zip: HOOVER, AL 35244

Title: MGRM (X) Delete
Name: RUSSELL, CHARMAINE
Address: 3419 VOLLEY CT
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: MGRM (X) Delete
Name: RUSSELL, MARK
Address: 3419 VOLLEY CT
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RUSSELL, CHARMAINE
Address: 8643 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: MGRM (X) Change () Addition
Name: RUSSELL, MARK
Address: 8643 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARMAINE RUSSELL

MGRM

07/17/2007

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