

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90064 017 ***138.75

DOCUMENT # L06000038292

1. Entity Name
PCBP, LLC



Principal Place of Business
11555 CENTRAL PARKWAY
SUITE 1104
JACKSONVILLE, FL 32224

Mailing Address
P O BOX 3153
PONTE VEDRA BEACH, FL 32004

60004634



01102008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-0141875

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

O'CONNOR, MARK E
11555 CENTRAL PARKWAY
SUITE 1104
JACKSONVILLE, FL 32224

**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

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME O'CONNOR, MARK E
STREET ADDRESS 11555 CENTRAL PARKWAY, SUITE 1104
CITY-ST-ZIP JACKSONVILLE, FL 32224

TITLE MGRM
NAME HALL, PIKE III
STREET ADDRESS 11555 CENTRAL PARKWAY, SUITE 1104
CITY-ST-ZIP JACKSONVILLE, FL 32224

TITLE
NAME
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CITY-ST-ZIP

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

MARK E. O'CONNOR

Date

1-10-08

Daytime Phone #

904 998 9700