2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000068243

Entity Name: CATHEDRAL RESIDENCES LLC

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	SIDE DRIVE S' /ILLE, FL 3221				
Current Mailing Address:			New Mailing Address:		
	SIDE DRIVE S VILLE, FL 3221				
FEI Number: 59-6161532 FEI Number Applied For ()		FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
JACKSON\	PENDENT DRI /ILLE, FL 3220)25017 US	rnoso of changing it	ts registered office or registered agent, or both	
in the State		abilitis tilis statement for the pu	pose of changing in	is registered office of registered agent, or both	
SIGNATUR					
	Electronic	c Signature of Registered Agen	t	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	D () [ANDERSON, JOH 2309 SAN JOSE JACKSONVILLE,	CIRCLE NORTH	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	VC () I HARRISON, EDV 256 EAST CHUR JACKSONVILLE,	CH STREET	Title: Name: Address: City-St-Zip:	S (X) Change () Addition JORGENSEN, MIKE E 7555 BEACH BLVD JACKSONVILLE, FL 32216	
Title: Name: Address: City-St-Zip:	BERG, REBECC	ULEVARD, SUITE 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CD () I HILL, JAYNE B 6439 WOOD VAI JACKSONVILLE,		Title: Name: Address: City-St-Zip:	C (X) Change () Addition HILL, JAYNE B 6439 WOOD VALLEY ROAD JACKSONVILLE, FL 32217	
Title: Name: Address: City-St-Zip:	PARKER, AVA	Delete N STREET, SUITE 200 FL 32202	Title: Name: Address: City-St-Zip:	CEO (X) Change () Addition BARTON, TERESA K 4250 LAKESIDE DRIVE, SUITE 300 JACKSONVILLE, FL 32210	
Title: Name: Address: City-St-Zip:	D () [WEATHERBY, M 4062 CORDOVA JACKSONVILLE	AVENUE	Title: Name: Address: Citv-St-Zip:	D (X) Change () Addition RICHARDSON, CATHERINE 4631 ALGONQUIN AVENUE JACKSONVILLE FL 32207	

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: TERESA K BARTON CEO 04/28/2009