

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000072601 .

1. Entity Name
3952 MAYPORT ROAD, LLC



Principal Place of Business
2275 ATLANTIC BLVD., SUITE 100
NEPTUNE BEACH, FL 3

Mailing Address
2275 ATLANTIC BLVD., SUITE 100
NEPTUNE BEACH, FL 3



05062008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5248202	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SORRELL, MARY C
2275 ATLANTIC BLVD., SUITE 200
NEPTUNE BEACH, FL 32266

**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
Due by September 12, 2008**

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

U000000949346
06/03/08-80024-021 150.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HIONIDES, CHRIS
STREET ADDRESS	2275 ATLANTIC BLVD SUITE 100
CITY-ST-ZIP	NEPTUNE BEACH, FL 32266

TITLE	MGRM
NAME	CAMPBELL, ERIC
STREET ADDRESS	2275 ATLANTIC BLVD SUITE 100
CITY-ST-ZIP	NEPTUNE BEACH, FL 32266

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
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.

Chris Hionides

904-241-1501

5-6-08