2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086479

Entity Name: PAGE ROAD, LLC

FILED Apr 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4315 PABLO OAKS CT 4315 PABLO OAKS CT JACKSONVILLE, FL JACKSONVILLE, FL 32224 US **Current Mailing Address: New Mailing Address:** 4315 PABLO OAKS CT 4315 PABLO OAKS CT JACKSONVILLE, FL JACKSONVILLE, FL 32224 US FEI Number: 20-5486150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLG MANAGEMENT SERVICES, LLC 4315 PABLO OAKS CT JACKSONVILLE, FL 32224 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Delete (X) Change () Addition SLG MANAGEMENT SERVI, CES, LLC STOKES, CHESTER JR Name: Name: 4315 PABLO OAKS CT Address: 4315 PABLO OAKS CT Address: JACKSONVILLE, FL 32224 US City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: Title: PRES () Change (X) Addition () Delete Name: KIRKPATRICK, MATT H Name: Address: Address: 4315 PABLO OAKS COURT City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32224 US Title: () Delete Title: () Change (X) Addition BUSH, TAYLOR Name: Name: 4315 PABLO OAKS COURT Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32224 US Title: () Delete Title: () Change (X) Addition Name: Name: KUNKEL, JOHN C 4315 PABLO OAKS COURT Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32224 US Title: () Delete Title: VPSC () Change (X) Addition HOLM, MALLORY G Name: Name: 4315 PABLO OAKS COURT Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32224 US Title: () Delete Title: () Change (X) Addition FREDENHAGEN, SHARON W Name: Name: Address: Address: 4315 PABLO OAKS COURT JACKSONVILLE, FL 32224 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN C. KUNKEL VP 04/04/2007