2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087013

Address:

City-St-Zip:

LONGWOOD, FL 32779

Entity Name: TROPICAL HOLDINGS OF JACKSONVILLE, LLC

FILED Feb 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3763 HARBOR CREEK COURT JACKSONVILLE, FL 32224 **Current Mailing Address: New Mailing Address:** 3763 HARBOR CREEK COURT JACKSONVILLE, FL 32224 FEI Number: 20-5753707 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: BARKSDALE, CAROLINE 3763 HARBOR CREEK COURT JACKSONVILLE, FL 32224 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: MGRM Title: () Change () Addition () Delete BARKSDALE, CAROLINE Name: Name: 3763 HARBOR CREEK COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: MGRM Title: MGRM () Delete (X) Change () Addition CANEZA, ERIN Name: CANEZA, ERIN Name: Address: 826 ELLWOOD AVENUE Address: 1230 MERCEDES PLACE City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804 Title: MGRM () Delete Title: () Change () Addition JONES, ROBERT M Name: Name: Address: 2144 ALAQUA LAKES Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JONES, THOMAS Name: Address: 2144 ALAQUA LAKES Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition JONES, LINDA Name: Name: 2144 ALAQUA LAKES

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.

Address:

City-St-Zip:

SIGNATURE: MARTIN J. WILD 02/14/2009