

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114249

Entity Name: J. V. OF GAINESVILLE, LLC

FILED  
Mar 26, 2009  
Secretary of State

## Current Principal Place of Business:

4468 VIENNA WOODS WAY  
GAINESVILLE, FL 32605

## New Principal Place of Business:

14145 W NEWBERRY RD  
GAINESVILLE, FL 32668

## Current Mailing Address:

4468 VIENNA WOODS WAY  
GAINESVILLE, FL 32605

## New Mailing Address:

FEI Number: 20-5898325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLEN, RAY F  
4468 VIENNA WOODS WAY  
GAINESVILLE, FL 32605 US

## Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete  
Name: ALLEN, RAY F  
Address: 4468 VIENNA WOODS WAY  
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM ( ) Delete  
Name: ALLEN, JAMIE R  
Address: 4468 VIENNA WOODS WAY  
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM ( ) Delete  
Name: AMERSON, PAT  
Address: 144 LOUANA COVE  
City-St-Zip: HOT SPRINGS, AK 71913

Title: MGRM ( ) Delete  
Name: ALLEN, MICHAEL  
Address: 8470 SW 10TH PLACE  
City-St-Zip: GAINESVILLE, FL 32601

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RAY ALLEN

MGR

03/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date