

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116989

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: NORTH FLORIDA PARTNERS, LLC

## Current Principal Place of Business:

2349VILLAGE SQ PKWY  
120  
ORANGE PARK, FL 23003 US

## New Principal Place of Business:

## Current Mailing Address:

2349VILLAGE SQ PKWY  
120  
ORANGE PARK, FL 23003 US

## New Mailing Address:

FEI Number: 20-8011056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PANNOZZO, VINCENT P  
14598 MARSH VIEW DRIVE  
JACKSONVILLE, FL 32250 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: MGRM ( ) Delete  
Name: PANNOZZO, VINCENT P  
Address: 14598 MARSH VIEW DRIVE  
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: MGRM ( ) Delete  
Name: MCGIVOR, JOHN C  
Address: 14598 MARSH VIEW DRIVE  
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: MGRM ( ) Delete  
Name: ROSENBERGER, DARYL  
Address: 1432 ST. JOHNS BLUFF ROAD  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: MGRM ( ) Delete  
Name: BURGESS, ERIC S  
Address: 1300 MARSH LANDING PKWY #112  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGRM ( ) Delete  
Name: BYWATERS, CARLTON  
Address: 2349 VILLAGE SQ PKWY  
City-St-Zip: ORANGE PK, FL 32003

## 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:

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: VINCENT PANNOZZO

PRES

03/21/2009

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