

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000118899

Entity Name: 16 EAST, LLC

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

7645 GATE PARKWAY  
SUITE 106  
JACKSONVILLE, FL 32256

## **New Principal Place of Business:**

7645 GATE PARKWAY  
SUITE 107  
JACKSONVILLE, FL 32256

## **Current Mailing Address:**

7645 GATE PARKWAY  
SUITE 106  
JACKSONVILLE, FL 32256

## **New Mailing Address:**

7645 GATE PARKWAY  
SUITE 107  
JACKSONVILLE, FL 32256

FEI Number: 20-8051934

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

GRAHAM, MICHAEL W  
7645 GATE PARKWAY  
SUITE 106  
JACKSONVILLE, FL 32256 US

## **Name and Address of New Registered Agent:**

GRAHAM, MICHAEL W  
7645 GATE PARKWAY  
SUITE 107  
JACKSONVILLE, FL 32256 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: MICHAEL W GRAHAM

01/10/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GRAHAM, MICHAEL W  
Address: 7645 GATE PARKWAY, SUITE 107  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM  
Name: MALONE, JAMES A III  
Address: 7645 GATE PARKWAY 107  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby 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: MICHAEL W GRAHAM

MGRM

01/10/2012

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