

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122159

FILED  
May 26, 2009  
Secretary of State

Entity Name: JEFFERSON STREET LLC

**Current Principal Place of Business:**

2825 N 10TH STREET  
SAINT AUGUSTINE, FL 32084

**New Principal Place of Business:**

630 W ADAMS STREET  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

2825 N 10TH STREET  
SAINT AUGUSTINE, FL 32084

**New Mailing Address:**

630 W ADAMS STREET  
JACKSONVILLE, FL 32204

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: MGR ( ) Delete  
Name: AVERY, RONALD R  
Address: 2825 N 10TH STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: PRES (X) Change ( ) Addition  
Name: KRALL, JOSEPH P  
Address: 630 W ADAMS STREET  
City-St-Zip: JACKSONVILLE, FL 32204

Title: ST ( ) Delete  
Name: KRALL, JOSEPH P  
Address: 2825 N 10TH STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: ST (X) Change ( ) Addition  
Name: KRALL, JOSEPH P  
Address: 630 W ADAMS STREET  
City-St-Zip: JACKSONVILLE, FL 32204

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: CH ( ) Change (X) Addition  
Name: AVERY, RONALD  
Address: 630 W ADAMS STREET  
City-St-Zip: JACKSONVILLE, FL 32204

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: JOSEPH P KRALL

PRES

05/26/2009

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