

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015775

Entity Name: JA MELBOURNE PROPERTIES, LC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

12740 ATLANTIC BLVD
SUITE 7
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

12740 ATLANTIC BLVD
SUITE 7
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 20-8440227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, D.L. DICKY JR
12740 ATLANTIC BLVD
SUITE 7
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

SMITH, JR, ORVILLE R
12740 ATLANTIC BLVD
SUITE 7
JACKSONVILLE, FL 32225 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: ORVILLE R SMITH JR

04/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WORKMAN, DAVID E JR
Address: 11702 BEACH BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGR (X) Delete
Name: SMITH, O.R.DICKY JR
Address: 12740-7 ATLANTIC BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SMITH, JR, ORVILLE R
Address: 12740 ATLANTIC BLVD, SUITE 7
City-St-Zip: JACKSONVILLE, FL 32225

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: ORVILLE R SMITH JR

MGR

04/03/2009

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