

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000036335

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** THE VILLAS AT CARVER PARK GP, LLC

**Current Principal Place of Business:**

4300 MARSH LANDING BLVD  
101  
JACKSONVILLE BCH, FL 32250 US

**New Principal Place of Business:**

8933 WESTERN WAY  
14  
JACKSONVILLE, FL 32256 US

**Current Mailing Address:**

4300 MARSH LANDING BLVD  
101  
JACKSONVILLE BCH, FL 32250 US

**New Mailing Address:**

8933 WESTERN WAY  
14  
JACKSONVILLE, FL 32256 US

**FEI Number:** 20-8781012

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FINLAY, CHRISTOPHER  
4300 MARSH LANDING BLVD  
SUITE 101  
JACKSONVILLE BCH, FL 32250 US

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

FINLAY, CHRISTOPHER  
8933 WESTERN WAY  
SUITE 14  
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: \_\_\_\_\_

04/26/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FINLAY, CHRISTOPHER  
Address: 8933 WESTERN WAY, SUITE 14  
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: CHRISTOPHER C FINLAY

M

04/26/2010

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