

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000004209

Entity Name: JONESVILLE TENNIS, LLC

FILED  
Apr 15, 2009  
Secretary of State

**Current Principal Place of Business:**

3229 NW 24TH AVE  
GAINESVILLE, FL 32605 US

**New Principal Place of Business:**

3401 NW 143RD ST  
GAINESVILLE, FL 32606 US

**Current Mailing Address:**

3229 NW 24TH AVE  
GAINESVILLE, FL 32605 US

**New Mailing Address:**

FEI Number: 80-0223628      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PORTER, DANIELLA S  
3229 NW 24TH AVE  
GAINESVILLE, FL 32605 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: PORTER, DAVID G JR.  
Address: 3229 NW 24TH AVE  
City-St-Zip: GAINESVILLE, FL 32605 US

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: DANIELLA, PORTER S  
Address: 3229 NW 24TH AVE  
City-St-Zip: GAINESVILLE, FL 32605 US

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: DAVID PORTER

MGRM

04/15/2009

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