2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000031296

Entity Name: KENNARD-JENNISON ENDEAVORS, LLC

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3225 SOUTHSIDE BLVD STE 2 3225 SOUTHSIDE BLVD JACKSONVILLE, FL 32216

JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

3225 SOUTHSIDE BLVD STE 2 PO BOX 17156

JACKSONVILLE, FL 32216 JACKSONVILLE, FL 322457156

FEI Number: 26-2271691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH HULSEY & BUSEY PROFESSIONAL ASSOCIA

225 WATER STREET STE 1800 JACKSONVILLE, FL 32202

DURDEN, MARY S VP 3225 SOUTHSIDE BOULEVARD, SUITE 2 JACKSONVILLE, FL 32216

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: MARY S. DURDEN 04/10/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition JENNISON, ELIZABETH K PRES. Name: Name:

Address: Address: 3225 SOUTHSIDE BOULEVARD, SUITE 2

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32216

Title: Title: () Change (X) Addition () Delete

JENNISON, CAROLINE K ST Name: Name:

Address: Address: 3225 SOUTHSIDE BOULEVARD, SUITE 2

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32216

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: CAROLINE K. JENNISON 04/10/2009