

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000031296

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** KENNARD-JENNISON ENDEAVORS, LLC

**Current Principal Place of Business:**

3225 SOUTHSIDE BLVD  
2  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 17156  
JACKSONVILLE, FL 322457156

**New Mailing Address:**

**FEI Number:** 26-2271691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DURDEN, MARY S VP  
3225 SOUTHSIDE BOULEVARD, SUITE 2  
JACKSONVILLE, FL 32216 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: P  
Name: JENNISON, ELIZABETH K PRES.  
Address: 3225 SOUTHSIDE BOULEVARD, SUITE 2  
City-St-Zip: JACKSONVILLE, FL 32216

Title: ST  
Name: JENNISON, CAROLINE K ST  
Address: 3225 SOUTHSIDE BOULEVARD, SUITE 2  
City-St-Zip: JACKSONVILLE, FL 32216

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: ELIZABETH K. JENNISON

PRES

04/18/2011

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