

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000048553

Entity Name: GIRVIN CENTER, LLC

**FILED**  
**Jan 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2950 HALCYON LANE  
SUITE 205  
JACKSONVILLE, FL 32223

**New Principal Place of Business:**

**Current Mailing Address:**

2950 HALCYON LANE  
SUITE 205  
JACKSONVILLE, FL 32223

**New Mailing Address:**

FEI Number: 26-2618334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AKEL, ANDREW S  
2950 HALCYON LANE  
SUITE 205  
JACKSONVILLE, FL 32223 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: PRES  
Name: AKEL, ANDREW  
Address: 12744 EDENBRIDGE COURT  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP  
Name: AKEL, JACK S  
Address: 1995 HIBERNIA COURT  
City-St-Zip: JACKSONVILLE, FL 32223

Title: TREA  
Name: AKEL, TERESA B  
Address: 12744 EDENBRIDGE COURT  
City-St-Zip: JACKSONVILLE, FL 32223

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: ANDREW S. AKEL

PRES

01/27/2012

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