

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000058313

Entity Name: JAX BONOS, L.L.C.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

4141 SOUTHPPOINT DR. EAST SUITE B
JACKSONVILLE, FL 32216

New Principal Place of Business:

10175 FORTUNE PARKWAY, SUITE 1005
JACKSONVILLE, FL 32256

Current Mailing Address:

4141 SOUTHPPOINT DR. EAST SUITE B
JACKSONVILLE, FL 32216

New Mailing Address:

10175 FORTUNE PARKWAY, SUITE 1005
JACKSONVILLE, FL 32256

FEI Number: 26-2837821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERFIELD, GARY D
4141 SOUTHPPOINT DR. EAST SUITE B
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

SILVERFIELD, GARY D
10175 FORTUNE PARKWAY, SUITE 1005
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:

04/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: SILVERFIELD, GARY
Address: 10175 FORTUNE PARKWAY, SUITE 1005
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Change (X) Addition
Name: GRAINGER, FARLEY
Address: 10550 DEERWOOD PARK BLVD., SUITE 609
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Change (X) Addition
Name: SILVERFIELD, LEED
Address: 10175 FORTUNE PARKWAY, SUITE 1005
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Change (X) Addition
Name: CRANFORD, JAMES
Address: 10175 FORTUNE PARKWAY, SUITE 1005
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP () Change (X) Addition
Name: BREEDING, HELEN
Address: 10175 FORTUNE PARKWAY, SUITE 1005
City-St-Zip: JACKSONVILLE, FL 32256

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: GARY D. SILVERFIELD

P

04/23/2009

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