

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000060270

Entity Name: NORTH RIVER LOT 3, LLC

FILED
Jan 25, 2009
Secretary of State

Current Principal Place of Business:

2694 SIMS COVE LANE
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

2694 SIMS COVE LANE
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUROSKO, W.A.
2694 SIMS COVE LANE
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: MGRM () Delete
Name: KUROSKO, W.A.
Address: 2694 SIMS COVE LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM () Delete
Name: KUROSKO, BONNIE D
Address: 2694 SIMS COVE LANE
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES:

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: KUROSKO W.A. MGRM 01/25/2009

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