

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000063420

FILED  
Jun 12, 2012  
Secretary of State

Entity Name: 126 WEST ADAMS STREET, LLC

**Current Principal Place of Business:**

126 WEST ADAMS STREET  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

126 WEST ADAMS STREET  
JACKSONVILLE, FL 32202

**New Mailing Address:**

FEI Number: 26-3516950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FIGGINS, MICHAEL  
126 WEST ADAMS STREET  
JACKSONVILLE, FL 32202 US

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

MARTYN, KIMBERLY  
126 WEST ADAMS STREET  
JACKSONVILLE, FL 32202 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: KIMBERLY MARTYN

06/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: SLATER, THOMAS ESQ.  
Address: ONE INDEPENDENT DRIVE, SUITE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

Title: VP  
Name: LAWRENCE, NOEL G ESQ.  
Address: PO BOX 726  
City-St-Zip: JACKSONVILLE, FL 32201

Title: T  
Name: HARRELL, RENEE D ESQ.  
Address: 4735 SUNBEAM ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S  
Name: SCHICKEL, JOHN S ESQ.  
Address: ONE INDEPENDENT DRIVE, STE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

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: KIMBERLY MARTYN

RA

06/12/2012

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