

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000089878

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Entity Name:** DUVAL STATION OUTPARCEL 4, LLC

**Current Principal Place of Business:**

3701 COASTAL VIEW DR  
JACKSONVILLE, FL 32250

**New Principal Place of Business:**

3701 COASTAL VIEW DR  
BEACH BOULEVARD  
JACKSONVILLE, FL 32250

**Current Mailing Address:**

P.O. BOX 51089  
JACKSONVILLE BEACH, FL 32240

**New Mailing Address:**

**FEI Number:** 26-3415731

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KHOSROWZADEH, BAHMAN  
3701 COASTAL VIEW DR  
JACKSONVILLE, FL 32250 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: MR  
Name: KHOSROWZADEH, BAHMAN  
Address: 3701 COASTAL VIEW DRIVE  
City-St-Zip: JACKSONVILLE, FL 32250

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: BAHMAN KHOSROWZADEH

MGR

04/09/2012

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