

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000102547

FILED  
Jan 31, 2011  
Secretary of State

Entity Name: 128 SPANISH OAKS LANE, LLC

**Current Principal Place of Business:**

245 RIVERSIDE AVENUE  
310  
JACKSONVILLE, FL 32202 US

**New Principal Place of Business:**

**Current Mailing Address:**

245 RIVERSIDE AVENUE  
310  
JACKSONVILLE, FL 32202 US

**New Mailing Address:**

FEI Number: 27-1589610      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SACERDOTE, GRACE M ST  
245 RIVERSIDE AVENUE  
310  
JACKSONVILLE, FL 32202 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: P  
Name: WATERS, NINA M P  
Address: 245 RIVERSIDE AVENUE, SUITE 310  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: ST  
Name: SACERDOTE, GRACE M ST  
Address: 245 RIVERSIDE AVENUE, SUITE 310  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGRM  
Name: THE COMMUNITY FOUNDATION, INC.  
Address: 245 RIVERSIDE AVENUE, SUITE 310  
City-St-Zip: JACKSONVILLE, FL 32202 US

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: GRACE M. SACERDOTE, CPA      ST      01/31/2011

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