

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000068182

**Entity Name:** LNO JACKSONVILLE, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8475 BAY MEADOWS RD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

27805 SW 197 AVENUE  
HOMESTEAD, FL 33031

**New Mailing Address:**

**FEI Number:** 27-2923346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERLMAN, RICHARD  
27805 SW 197 AVENUE  
HOMESTEAD, FL 33031 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  
**Name:** MEDALLION ORLANDO WEST, LLC  
**Address:** 4023 AVELON ROAD  
**City-St-Zip:** WINTER GARDEN, FL 34787

**Title:** MGR  
**Name:** PERLMAN, RICHARD  
**Address:** 27805 SW 197 AVENUE  
**City-St-Zip:** HOMESTEAD, FL 33031

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:** RICHARD PERLMAN

MGR

04/30/2012

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