2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2011
Secretary of State

DOCUMENT# L10000115127

Entity Name: LENOX SQUARE CENTER, LLC

Current Principal Place of Business:

2950 HALCYON LN
STE 205
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

2950 HALCYON LN
STE 205
JACKSONVILLE, FL 32223

New Mailing Address:

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

Name and Address of Current Registered Agent:

AKEL, ANDREW S
12744 EDENBRIDGE CT
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
Name: AKEL, ANDREW S
Address: 12744 EDENBRIDGE CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM
Name: AKEL, JACK S
Address: 1995 HIBERNIA CT
City-St-Zip: JACKSONVILLE, FL 32223

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 Statues.

SIGNATURE: ANDREW S. AKEL MGRM 04/18/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date