

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000072764

**FILED
May 07, 2012
Secretary of State**

Entity Name: 800 LOMAX LLC

Current Principal Place of Business:

ONE INDEPENDENT DRIVE
SUITE 1200
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

ONE INDEPENDENT DRIVE
SUITE 1200
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 45-2609713 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CONTEGA BUSINESS SERVICES, LLC
ONE INDEPENDENT DRIVE
SUITE 1200
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: MGR
Name: HAWTHORNE, RICHARD W
Address: ONE INDEPENDENT DRIVE, STE 1200
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: RICHARD W. HAWTHORNE MGR 05/07/2012

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