

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004655

Entity Name: DLAC/WRI, L.L.C.

FILED
Apr 21, 2011
Secretary of State

Current Principal Place of Business:

1819 ALBERT STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

PO BOX 330358
JACKSONVILLE, FL 322330569

New Mailing Address:

1819 ALBERT STREET
JACKSONVILLE, FL 32202

FEI Number: 26-8012895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DIXON, CARLTON
Address: 505 LANCASTER STREET, 4B
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGR
Name: HOUSE, BRIAN
Address: 75-D YORK AVENUE
City-St-Zip: RANDOLPH, MA 02368

Title: MGRM
Name: DLAC PARTNERSHIP
Address: 505 LANCASTER STREET, 4B
City-St-Zip: JACKSONVILLE, FL 32204

Title: MGRM
Name: 1819 ALBERT STREET, LLC
Address: 1819 ALBERT STREET
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: CARLTON DIXON

MGR

04/21/2011

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