

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004655

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

FILED  
Apr 25, 2012  
Secretary of State

**Current Principal Place of Business:**

1819 ALBERT STREET  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

1819 ALBERT STREET  
JACKSONVILLE, FL 32202

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

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: 1819 ALBERT STREET  
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGR  
Name: HOUSE, BRIAN J  
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: ROBERT J. CALLAHAN

AP

04/25/2012

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