

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002937

FILED
Jan 06, 2004
Secretary of State

Entity Name: JACKSONVILLE LODGING, L.L.C.

Current Principal Place of Business:

523 CAMELOT DRIVE
ABERDEEN, SD 57401

New Principal Place of Business:

Current Mailing Address:

523 CAMELOT DRIVE
ABERDEEN, SD 57401

New Mailing Address:

FEI Number: 75-3086401

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/MEMBERS:

Title: MGRM () Delete
Name: WEISBECK, KEVIN J
Address: 2211 8TH AVE. NE
City-St-Zip: ABERDEEN, SD 57401

Title: MGRM () Delete
Name: MCGRANE, MARK K
Address: 138 E. PHILIP
City-St-Zip: DES MOINES, IA 50315

Title: MGRM () Delete
Name: VERSHURE, PAUL
Address: 40 N. 15TH AVE. UNIT 60
City-St-Zip: WAITE PARK, MN 56387

Title: MGRM () Delete
Name: HELM, MICHAEL P
Address: 13890 370TH AVE.
City-St-Zip: MINA, SD 57462

Title: MGRM () Delete
Name: STOCKERT, JEFFERY A
Address: 523 CAMELOT DRIVE
City-St-Zip: ABERDEEN, SD 57401

Title: MGRM () Delete
Name: R&R RIVETT INVESTMEN, TS, L.L.C.
Address: 523 CAMELOT DRIVE
City-St-Zip: ABERDEEN, SD 57401

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: JEFFREY A. STOCKERT

MGRM

01/06/2004

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