

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 28, 2005 8:00 am
Secretary of State

06-28-2005 90027 006 ****50.00

DOCUMENT # M04000001096					
1. Entity Name JACKSONVILLE PROPERTIES, LLC					
Principal Place of Business 2 STONEFIELD LANE WELLESLEY, MA 02482			Mailing Address 2 STONEFIELD LANE WELLESLEY, MA 02482		
2. Principal Place of Business 10 Cutters Bluff		3. Mailing Address 10 Cutters Bluff			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Weston, MA		City & State Weston, MA			
Zip 02493		Country USA		02152005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 20-0694255		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				02152005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent MCGUFFEY, LAURA 4318 JEREMY'S LANDING DR. SOUTH JACKSONVILLE, FL 32258			7. Name and Address of New Registered Agent Name Elizabeth Storey Street Address (P.O. Box Number is Not Acceptable) 86279 Meadowfield Bluff City Yulee, FL 32099		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Elizabeth Storey</u> Elizabeth Storey DATE <u>6-27-05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAREHSHORI, CYNTHIA 2 STONEFIELD LANE WELLESLEY, MA 02482	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	10 Cutters Bluff Weston, MA 02493
MGRM DAREHSHORI, CYNTHIA 2 STONEFIELD LANE WELLESLEY, MA 02482		<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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MGRM DAREHSHORI, CYNTHIA 2 STONEFIELD LANE WELLESLEY, MA 02482		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>Cynthia Darehshori</u> Cynthia Darehshori DATE <u>6/29/05</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					