

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000340

FILED  
Mar 11, 2008  
Secretary of State

Entity Name: JACKSONVILLE 5 L.L.C.

**Current Principal Place of Business:**

2860 BUFORD HIGHWAY  
SUITE E-101  
DULUTH, GA 30096 US

**New Principal Place of Business:**

**Current Mailing Address:**

2860 BUFORD HIGHWAY  
SUITE E-101  
DULUTH, GA 30096 US

**New Mailing Address:**

FEI Number: 58-2291860      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SILLS, AARON  
6542 HYPOLUXO ROAD  
SUITE 102  
LAKE WORTH, FL 33467 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 ( ) Delete  
Name: SMOKER, LOWELL A  
Address: 2860 BUFORD HIGHWAY, STE. E-101  
City-St-Zip: DULUTH, GA 30096 US

Title: MGRM ( ) Delete  
Name: MOBILE ENTERPRISES,, INC.  
Address: 2860 BUFORD HIGHWAY, STE. E-101  
City-St-Zip: DULUTH, GA 30096 US

**ADDITIONS/CHANGES:**

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 exemption stated in Chapter 119, 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: AMY MCCLESKEY

MGR

03/11/2008

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