


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2004 08:00 AM
Secretary of State

DOCUMENT # M98000001362
 1. Entity Name
 9951 ATLANTIC BOULEVARD, L.L.C.



Principal Place of Business 9951 ATLANTIC BLVD. JACKSONVILLE, FL 32225	Mailing Address 22 BALL STREET, 3RD FLOOR IRVINGTON, NJ 07111
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DO NOT WRITE IN THIS SPACE



03182004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 22-3619058	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 NATIONSCORP REGISTERED AGENTS, INC.
 526 E. PARK AVENUE
 TALLAHASSEE, FL 32301

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B. 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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CALLER, MARK 22 BALL STREET, 3RD FLOOR IRVINGTON, NJ 07111
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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 60B, Florida Statutes.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____