2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # Z00578

1. Entity Name

JACKSONVILLE TELEPORT, L.C.



FILED Mar 22, 2007 08:00 A Secretary of State

Principal Place of Business

526 STOCKTON STREET JACKSONVILLE, FL 32204

Mailing Address

526 STOCKTON STREET JACKSONVILLE, FL 32204



03052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3145998

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PAINTER, ROGER W 526 STOCKTON STREET JACKSONVILLE, FL 32204

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of char the obligations of registered agent.	inging its registered office or registered agent, or both, in the	e State of Florida. I am familiar with, and accept
SIGNATURE		
Signature, typed or printed name of registered agent and title # applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007	•	
MANAGING MEMBERS/MANAGERS		

MGRM TITLE PAINTER, ROGER NAME STREET ADDRESS **526 STOCKTON STREET** CITY-ST-ZIP JACKSONVILLE, FL 32204 **MGRM** TITLE NAME NICHOLS, CHARLES STREET ADDRESS **526 STOCKTON STREET** CITY-ST-ZIP JACKSONVILLE, FL 32204 TITLE NAME STREET ADDRESS CITY-ST-ZIP TTLE NAME STREET ADDRESS CITY-ST-ZIP TTLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000675444 03/30/07-80020-004 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 eath; 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.

CICMATIDE.

Road IN Para to

3-20-07