2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # Z00578

1. Entity Name

JACKSONVILLE TELEPORT, L.C.



FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

526 STOCKTON STREET JACKSONVILLE, FL 32204

526 STOCKTON STREET JACKSONVILLE, FL 32204



03072008 No Chg-LLC

CR2E083 (12/07)

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

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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	f Florida. I am familiar with, and accept
the obligations of registered agent.	

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000860372 04/02/08-80068-005 138.75

MANAGING MEMBERS/MANAGERS 9. TITLE MGRM PAINTER, ROGER NAME STREET ADDRESS **526 STOCKTON STREET** CITY-ST-ZIP JACKSONVILLE, FL 32204 MGRM TITLE NICHOLS, CHARLES NAME STREET ADDRESS **526 STOCKTON STREET** JACKSONVILLE, FL 32204 CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

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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 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:

JRE: DOG TO THE OF PENTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-12-08

(9047388-2696

Date

Daytime Phone #