

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000071188

**Entity Name:** 2536 BEAVER BROOK PLACE LLC

**Current Principal Place of Business:**

11250 ST. AUGUSTINE ROAD  
15323  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

11250 ST. AUGUSTINE ROAD  
15323  
JACKSONVILLE, FL 32257

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

JORGENSEN, MIKE  
11250 ST. AUGUSTINE ROAD  
15323  
JACKSONVILLE, FL 32257 US

*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

**Authorized Person(s) Detail :**

Title            AMBR  
Name            JONES, SARAH A  
Address        8119 KENWOOD DRIVE NORTH  
City-State-Zip: JACKSONVILLE FL 32210

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SARAH ANITA JONES

**OWNER**

**03/21/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date