## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000119102

Entity Name: JACKSONVILLE PLAZA RESTAURANT PARTNERS, LLC

FILED
Mar 09, 2016
Secretary of State
CC0418566013

**Current Principal Place of Business:** 

6675 CORPORATE CENTER PARKWAY, SUITE 100

JACKSONVILLE, FL 32216

## **Current Mailing Address:**

6675 CORPORATE CENTER PARKWAY, SUITE 100 JACKSONVILLE, FL 32216

FEI Number: 47-2105209 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLEY, W ALEX 6675 CORPORATE CENTER PARKWAY, SUITE 100 JACKSONVILLE, FL 32216 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: W ALEX COLEY 03/09/2016

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title AUTHORIZED MEMBER Title AUTHORIZED MEMBER
Name COLEY, W ALEX Name CONN, JEFFREY A

Address 6675 CORPORATE CENTER Address 6675 CORPORATE CENTER

PARKWAY, SUITE 100 PARKWAY, SUITE 100

City-State-Zip: JACKSONVILLE FL 32216 City-State-Zip: JACKSONVILLE FL 32216

Title MANAGER

Name VUCUREVICH SIMONS ADVISORY

**GROUP LLC** 

Address 6675 CORPORATE CENTER

PARKWAY, SUITE 100

City-State-Zip: JACKSONVILLE FL 32216

SIGNATURE: CAROLINE MARKS

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.

Electronic Signature of Signing Authorized Person(s) Detail

MGR

03/09/2016

Date