

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000262609

**Entity Name:** 1258 SJB LLC

**Current Principal Place of Business:**

1258 SAINT JOHNS BLUFF RD N  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

PO BOX 54285  
JACKSONVILLE, FL 32245

**FEI Number:** 84-3425904

**Certificate of Status Desired:** No

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

ZALUSKY, RAYMOND  
1258 ST JOHNS BLUFF RD. N  
JACKSONVILLE, FL 32225 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	MGR	Title	MGR
Name	ZALUSKY, RAYMOND	Name	ZALUSKY, AMY
Address	1258 SAINT JOHNS BLUFF RD N	Address	1258 SAINT JOHNS BLUFF RD N
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32225

*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:** RAYMOND ZALUSKY

MGR

01/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date