

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Feb 18, 2009
Secretary of State**

DOCUMENT# L03000003060

Entity Name: LEWMIKE, L.L.C.

Current Principal Place of Business:

5150 BELFORT RD., BLDG. 100
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 551260
JACKSONVILLE, FL 32255

New Mailing Address:

FEI Number: 59-3764448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANSBACHER & SCHNEIDER, PA
5150 BELFORT RD., BLDG. 100
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DONZINGER, MICHAEL
Address: 8638 PHILLIPS HIGHWAY, SUITE 3
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: SCHNEIDER, MICHAEL
Address: 5150 BELFORT ROAD BLDG. 100
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DONZINGER, MICHAEL
Address: 8638 PHILLIPS HIGHWAY, SUITE 3
City-St-Zip: JACKSONVILLE, FL 32256

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MICHAEL DONZIGER

MGRM

02/18/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date