

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049416

FILED
Apr 17, 2006
Secretary of State

Entity Name: IDM, LLC

Current Principal Place of Business:

2481 HIGHWAY 71N
WEWAHITCHKA, FL 32465

New Principal Place of Business:

Current Mailing Address:

2564 INDIAN PASS RD
PORT SAINT JOE, FL 32456 US

New Mailing Address:

FEI Number: 20-1321807 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCLEMORE, WILLIAM W
2564 INDIAN PASS RD
PORT SAINT JOE, FL 32456 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: MGR () Delete
Name: MCLEMORE, WILLIAM W
Address: 2564 INDIAN PASS RD
City-St-Zip: PORT SAINT JOE, FL 32456

Title: MGRM () Delete
Name: STANLEY, GARY
Address: 224 JOHNSON LANE
City-St-Zip: WEWAHITCHKA, FL 32465

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM W MCLEMORE

MGR

04/17/2006

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