

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000005638

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: TRC JAXMAIN, LLC

**Current Principal Place of Business:**

125 G WAPPOO CREEK DRIVE  
CHARLESTON, SC 29412

**New Principal Place of Business:**

**Current Mailing Address:**

125 G WAPPOO CREEK DRIVE  
CHARLESTON, SC 29412

**New Mailing Address:**

FEI Number: 26-0723946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: TRC MANAGEMENT, LLC  
Address: 57 HASELL STREET  
City-St-Zip: CHARLESTON, SC 29401

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: TRC MANAGEMENT, LLC  
Address: 125 G WAPPOO CREEK DRIVE  
City-St-Zip: CHARLESTON, SC 29412

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: TRC MANAGEMENT

MGRM

04/23/2009

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