

**2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

**FILED  
Sep 20, 2005  
Secretary of State**

DOCUMENT# L01000014892

Entity Name: INOC, LLC

**Current Principal Place of Business:**

2008 RIVERSIDE AVENUE  
SUITE 200  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

2008 RIVERSIDE AVENUE  
SUITE 200  
JACKSONVILLE, FL 32204

**New Mailing Address:**

FEI Number: 59-3754560      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AUSTIN, RONALD R ESQUIRE  
1400 PRUDENTIAL DRIVE  
1  
JACKSONVILLE, FL 32207 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: SPENCER, CHARLES  
Address: 590 QUEENS HARBOR BLVD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM ( ) Delete  
Name: SAMPSON, JAMES  
Address: 4835 SOUTZI AVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: MGR ( ) Delete  
Name: JONES, CARLTON  
Address: 2008 AVERSIDE AVE , STE 200  
City-St-Zip: JACKSONVILLE, FL 32204

**ADDITIONS/CHANGES:**

Title: PRES (X) Change ( ) Addition  
Name: SPENCER, CHARLES  
Address: 590 QUEENS HARBOR BLVD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP (X) Change ( ) Addition  
Name: SAMPSON, JAMES  
Address: 4835 SOUTZI AVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: TRES (X) Change ( ) Addition  
Name: JONES, CARLTON  
Address: 2008 AVERSIDE AVE , STE 200  
City-St-Zip: JACKSONVILLE, FL 32204

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES F. SPENCER

PRES

09/20/2005

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