

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014892

FILED
Apr 08, 2009
Secretary of State

Entity Name: INOC, LLC

Current Principal Place of Business:

1732 MARGARET ST
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

1732 MARGARET ST
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: PRES () Delete
Name: SPENCER, CHARLES
Address: 590 QUEENS HARBOR BLVD
City-St-Zip: JACKSONVILLE, FL 32225

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

Title: TS () Delete
Name: JONES, CARLTON
Address: 1732 MARGARET ST
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES:

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

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 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: CARLTON D. JONES

TS

04/08/2009

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