

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021346

FILED
Jan 09, 2008
Secretary of State

Entity Name: VESTCOR PARTNERS XXIV, LLC

Current Principal Place of Business:

3020 HARTLEY ROAD
SUITE 300
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

3020 HARTLEY ROAD
SUITE 300
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3759903 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAX CO
50 N. LAURA STREET
3300
JACKSONVILLE, FL 32202 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: VESTCOR, INC.,
Address: 3020 HARTLEY ROAD STE 300
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: ROOD, JOHN D
Address: 3020 HARTLEY ROAD STE 300
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Change (X) Addition
Name: FRICK, STEPHEN A
Address: 3020 HARTLEY ROAD, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32257

Title: VST () Change (X) Addition
Name: MOORE, CLARENCE S
Address: 3020 HARTLEY ROAD, SUITE 300
City-St-Zip: JACKSONVILLE, FL 32257

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: STEPHEN A FRICK

VP

01/09/2008

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