2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000035243

1. Entity Name

IMC COMMUNITIES LLC

Principal Place of Business Mailing Address

784 US HIGHWAY 1

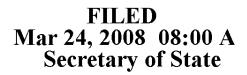
SUITE 24

NORTH PALM BEACH, FL 33408

784 US HIGHWAY 1

SUITE 24

NORTH PALM BEACH, FL 33408





01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 76-0722454 Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

CHOSNEK, IVAN M 784 US HWY ONE SUITE 24

NAME STREET ADDRESS CITY-ST-ZIP

NORTH PALM BEACH, FL 33408

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8.	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. I am familiar with, and accept
	the obligations of registered agent.
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(NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHOSNEK, IVAN M 784 U.S. HIGHWAY 1, SUITE 24 NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHOSNEK, BETSY L 784 US HWY 1 SUITE 24 NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY: SI-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000887158 04/08/08-80058-010 138.75

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE