

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000038534

**FILED**  
**Apr 25, 2010**  
**Secretary of State**

**Entity Name:** MAXJAX INVESTMENTS, LLC

**Current Principal Place of Business:**

2399 HAWKCREST DR. E  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

2399 HAWKCREST DR. E  
JACKSONVILLE, FL 32259

**New Mailing Address:**

**FEI Number:** 55-0849322

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIECKMAN, R. SCOTT  
2399 HAWKCREST DR E  
JACKSONVILLE, FL 32259 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  
**Name:** DIECKMAN, RICHARD S  
**Address:** 2399 HAWKCREST DR E  
**City-St-Zip:** JACKSONVILLE, FL 32259

**Title:** MGR  
**Name:** MCCLURE, HAL C  
**Address:** 303 EDGEWATER BRANCH DR  
**City-St-Zip:** JACKSONVILLE, FL 32259

I hereby 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:** R SCOTT DIECKMAN

MGR

04/25/2010

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