2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000048913

Entity Name: JAXVAIL DESIGNS, L.L.C.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4663 RIVER CITY DR. 3200 THIRD ST. S. SUITE 101 SUITE 101

JACKSONVILLE, FL 32246 JACKSONVILLE BEACH, FL 32250

Current Mailing Address: New Mailing Address:

4663 RIVER CITY DRIVE 3200 THIRD ST. S.

SUITE 101 SUITE 101

JACKSONVILLE, FL 32246 JACKSONVILLE BEACH, FL 32250

FEI Number: 57-1199924 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DODSON, KIM C/O BARTLETT & DEAL, P.A. 1350 PROFESSIONAL DRIVE, SUITE 101 PONTE VEDRA BEACH, FL 32082 US

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: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DODSON-PRESCOTT, KIMBERLEE A
 Name:

 Address:
 1032 PONTE VEDRA BLVD.
 Address:

 City-St-Zip:
 PONTE VEDRA, FL 32082
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PRESCOTT, WILLIAM R
 Name:

 Address:
 1032 PONTE VEDRA BLVD
 Address:

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082
 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: KIMBERLEE DODSON-PRESCOTT MGRM 04/14/2009