

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000048913

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

**FILED**  
**Aug 10, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

3200 THIRD ST. S.  
SUITE 101  
JACKSONVILLE BEACH, FL 32250

## **New Principal Place of Business:**

422 JACKSONVILLE DRIVE  
JACKSONVILLE BEACH, FL 32250

## **Current Mailing Address:**

3200 THIRD ST. S.  
SUITE 101  
JACKSONVILLE BEACH, FL 32250

## **New Mailing Address:**

422 JACKSONVILLE DRIVE  
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:**

DODSON, KIM  
C/O BARTLETT & DEAL, P.A.  
1350 PROFESSIONAL DRIVE, SUITE 101  
PONTE VEDRA BEACH, FL 32082 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: MGRM  
Name: DODSON-PRESCOTT, KIMBERLEE A  
Address: 1032 PONTE VEDRA BLVD.  
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM  
Name: PRESCOTT, WILLIAM R  
Address: 1032 PONTE VEDRA BLVD  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: KIMBERLEE DODSON PRESCOTT

MGRM

08/10/2010

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