2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2005
Secretary of State

DOCUMENT# L04000020282

Entity Name: JAXPLEX, LLC

Current Principal Place of Business:

1019 COLOMBO STREET
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

744 E. BURGESS ROAD, SUITE E-104
PENSACOLA, FL 32504 US

Current Mailing Address:

1019 COLOMBO STREET
JACKSONVILLE, FL 32207 US

New Mailing Address:

744 E. BURGESS ROAD, SUITE E-104
PENSACOLA, FL 32504 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICI, JAMES R ESQ
C/O COX & NICI
1185 IMMOKALEE ROAD, SUITE 110
NAPLES, FL 34110 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/MEMBERS:

Title: MGR ( ) Delete
Name: STEVENSON, FRANK
Address: 1019 COLOMBO STREET
City-St-Zip: JACKSONVILLE, FL 32207 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: STEVENSON, FRANK
Address: 744 E. BURGESS RD., SUITE E-104
City-St-Zip: PENSACOLA, FL 32504 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANK STEVENSON MGR 03/09/2005

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