

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000037197

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** OPTIMUS, LLC

**Current Principal Place of Business:**

1607 U.S. HIGHWAY 90 EAST  
MADISON, FL 32340

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 157  
MADISON, FL 32341

**New Mailing Address:**

**FEI Number:** 20-1147252

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, JAMES B IV  
420 LAKESHORE DR  
MADISON, FL 32340 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: DAVIS, JAMES B IV  
Address: 420 LAKESHORE DR  
City-St-Zip: MADISON, FL 32340

Title: MGRM  
Name: JOHNSON, JACOB K JR  
Address: 1607 US HWY 90 EAST  
City-St-Zip: MADISON, FL 32340

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: JACOB K. JOHNSON, JR.

MGRM

01/04/2010

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