2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 09, 2008 08:00 All Secretary of State DOCUMENT # L04000046732 1. Entity Name FOX EQUITIES, LLC Principal Place of Business Mailing Address 4330 AFFLETONALE 4330 AFFLETONALE JACKSONMILLE PL 32210 JACKSON/ILLE FL 32210 03172008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number 20-1275394 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FOX, JOHN D III DO NOT WRITE 4330 APPLETON AVE JACKSONVILLE, FL 32210 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000888620

Applied For

Not Applicable

MANAGING MEMBERS/MANAGERS 9. MGRM TITLE FOX, JR, JOHN D NAME 4242 GARIBALDI AVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32210 MGRM TITLE FOX PEGGY P NAME STREET ADDRESS 4242 GARIBALDI AVE CITY-ST-ZIP JACKSONVILLE, FL 32210 MGRM fffLF FOX, III, JOHN D NAME STREET ADDRESS 2102 CLEMSON RD JACKSONVILLE, FL 32217 CJTY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHTY-ST-7IP

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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:

4-7-08