2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L04000049416

Entity Name: IDM, LLC

Current Principal Place of Business:

2481 HIGHWAY 71N
WEWAHITCHKA, FL 32465

New Principal Place of Business:

236 HWY 22
WEWAHITCHKA, FL 32465

Current Mailing Address:

2564 INDIAN PASS RD
PORT SAINT JOE, FL 32456 US

New Mailing Address:

P.O. BOX 612
WEWAHITCHKA, FL 32465 US

FEI Number: 20-1321807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCLEMORE, WILLIAM W
2564 INDIAN PASS RD
PORT SAINT JOE, FL 32456 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: MGR ( ) Delete
Name: MCLEMORE, WILLIAM W
Address: 2564 INDIAN PASS RD
City-St-Zip: PORT SAINT JOE, FL 32456

Title: MGRM ( ) Delete
Name: STANLEY, GARY
Address: 224 JOHNSON LANE
City-St-Zip: WEWAHITCHKA, FL 32465

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: WILLIAM MCLEMORE MGR 04/29/2009

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