

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058232

FILED
Jan 17, 2008
Secretary of State

Entity Name: IMCJAX LLC

Current Principal Place of Business:

950-23 BLANDING BLVD.
SUITE-222
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

950-23 BLANDING BLVD.
SUITE-222
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: 06-1729462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, ROBERT W III
2665 LOOPRIDGE DR
ORANGE PARK, FL 32065 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 () Delete
Name: HALL, ROBERT W III
Address: 2665 LOOPRIDGE DR
City-St-Zip: ORANGE PARK, FL 32065 US

Title: MGRM () Delete
Name: GREEN, SHELDON R
Address: 1189 GUNKA RD
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: MGRM (X) Delete
Name: CORBITT, LARRY W
Address: 1644 PLAYERS CLUB DR
City-St-Zip: ORANGE PARK, FL 32003 US

ADDITIONS/CHANGES:

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

Title: MRGM (X) Change () Addition
Name: CORBITT, LARRY W
Address: 1644 PLAYERS CLUB DR
City-St-Zip: ORANGE PARK, FL 32003 US

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: LARRY CORBITT

MGRM

01/17/2008

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