

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069124

Entity Name: C & S IMAGING, LLC

FILED
Mar 06, 2007
Secretary of State

Current Principal Place of Business:

4205 BELFORT ROAD
SUITE 2065
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4205 BELFORT ROAD
SUITE 2065
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 77-0647259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOWERS, STEPHEN A
4205 BELFORT ROAD
SUITE 2065
JACKSONVILLE, FL 32216 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: P () Delete
Name: STOWERS, STEPHEN A
Address: 4205 BELFORT ROAD, SUITE 2065
City-St-Zip: JACKSONVILLE, FL 32216

Title: V (X) Delete
Name: CUNNINGHAM, MICHAEL S
Address: 1801 BARRS STREET, SUITE 500
City-St-Zip: JACKSONVILLE, FL 32204 US

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 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: STEPHEN STOWERS

PRES

03/06/2007

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