2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2007
Secretary of State

DOCUMENT# L04000089706

Entity Name: JAX SHOES, L.L.C.

Current Principal Place of Business:

6622 SOUTHPOINT DRIVE SOUTH, SUITE 200
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

6622 SOUTHPOINT DRIVE SOUTH, SUITE 200
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-2020691 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

F&L CORP
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FL 32202 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:	CEO	( ) Delete
Name:	WEAVER, WAYNE	
Address:	6622 SOUTHPOINT DRIVE SOUTH SUITE 200	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	C	( ) Delete
Name:	DADE, PHILLIP	
Address:	6622 SOUTHPOINT DRIVE SOUTH SUITE 200	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	CFO	( ) Delete
Name:	MULLINS, DAVID	
Address:	6622 SOUTHPOINT DRIVE SOUTH SUITE 200	
City-St-Zip:	JACKSONVILLE, FL 32216	
Title:	VP	( ) Delete
Name:	WEAVER, BRADLEY W	
Address:	6622 SOUTHPOINT DR SOUTH # 200	
City-St-Zip:	JACKSONVILLE, FL 32216	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: DAVID MULLINS CFO 04/13/2007

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