

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091758

Entity Name: BIOCORD, LLC

FILED
Mar 31, 2008
Secretary of State

Current Principal Place of Business:

103 NORTH LAKE DRIVE, STE. B
ORMOND BEACH, FL 32714

New Principal Place of Business:

Current Mailing Address:

103 NORTH LAKE DRIVE, STE. B
ORMOND BEACH, FL 32714

New Mailing Address:

FEI Number: 20-2043642

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENNY, CHRISTIAN
103 NORTH LAKE DRIVE, STE. B
ORMOND BEACH, FL 32714 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: LEMERAND, L. GALE
Address: 103B NORTH LAKE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: RHONDA INVESTMENTS,, LLC
Address: 103B NORTH LAKE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: DAWN INVESTMENTS, LL, C
Address: 103B NORTH LAKE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: CURTIS, W. TIMOTHY
Address: 8 BROADCREEK CR
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: GARDNER, JAMES E
Address: 5 MONTILA PL
City-St-Zip: PALM COAST, FL 32135

Title: MGRM () Delete
Name: JENNY, CHRISTIAN
Address: 103B NORTH LAKE DR
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

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

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

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

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

Title: () Change () Addition
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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: L GALE LEMERAND

MGRM

03/31/2008

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