


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000021443 1. Entity Name I.M. PARTNERS, LLC	
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Principal Place of Business 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898	Mailing Address PO BOX 832 LAKE WALES, FL 33859-0832
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DO NOT WRITE IN THIS SPACE



01072008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2426253	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RAFOOL, RAYMOND J
1519 THIRD STREET S.E.
WINTER HAVEN, FL 33880

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YOUNG, RICHARD N 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WIGHT, JOHN W 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COLLINS, PAUL J 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOLEY, CHARLES T 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BIRCH, ROBERT S 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOWENSTEIN, HUGH P 2300 NORTH SCENIC HIGHWAY LAKE WALES, FL 33898

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IN THIS SPACE**

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01/11/08-80026-015 138.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

RICHARD N. YOUNG JR. MANAGING PARTNER

SIGNATURE:  **863-676-3425**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #