

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044863

Entity Name: IGD PHILIPS HWY, LLC

FILED  
Feb 28, 2008  
Secretary of State

**Current Principal Place of Business:**

9857 OLD ST. AUGUSTINE RD  
SUITE 5  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

9857 OLD ST. AUGUSTINE RD  
SUITE 5  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

FEI Number: 20-2975195

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

IGD INVESTMENTS LTD  
9857 OLD ST. AUGUSTINE RD  
SUITE 5  
JACKSONVILLE, FL 32257 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: IGD INVESTMENTS LTD,  
Address: 9857 OLD ST. AUGUSTINE RD, SUITE 5  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: EL HASSAN, MARC M  
Address: 9857 OLD ST. AUGUSTINE RD, SUITE 5  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: MGR ( ) Change (X) Addition  
Name: HASSAN, ANDY  
Address: 9857 OLD ST AUGUSTINE ROAD SUITE 5  
City-St-Zip: JACKSONVILLE, FL 32257 US

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: MARC MAJED EL HASSAN

MGR

02/28/2008

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