

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074406

Entity Name: JC SOLUTIONS, LLC

FILED
Mar 24, 2011
Secretary of State

Current Principal Place of Business:

5086 GOLF VIEW COURT,
SUITE 1612
DELRAY BEACH, FL 33484 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 88
WILKESBORO, NC 28697 US

New Mailing Address:

FEI Number: 20-3221387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, JILL
5086 GOLF VIEW COURT
DELRAY BEACH, FL 33484 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
Name: CARTER, JAMES H
Address: 5086 GOLF VIEW COURT, SUITE 1612
City-St-Zip: DELRAY BEACH, FL 33484

Title: MGRM
Name: CARTER, JILL M
Address: 5086 GOLF VIEW COURT, SUITE 1612
City-St-Zip: DELRAY BEACH, FL 33484

Title: MGRM
Name: BARNWELL, JAMES
Address: 596 MICAH'S WAY
City-St-Zip: MORAVIAN FALLS, NC 28654

Title: MGRM
Name: BARNWELL, DONNA
Address: 596 MICAH'S WAY
City-St-Zip: MORAVIAN FALLS, NC 28654

Title: MGRM
Name: CARTER, JAMES C
Address: 4309 POPPLETON AVENUE
City-St-Zip: OMAHA, NE 68105

I hereby 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: JILL M CARTER

MGRM

03/24/2011

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