

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086513

FILED
Mar 11, 2008
Secretary of State

Entity Name: PROVESCOR, LLC

Current Principal Place of Business:

105 SOUTHERN GROVE DRIVE
JACKSONVILLE, FL 32259

New Principal Place of Business:

105 SOUTHERN GROVE DRIVE
ST JOHNS, FL 32259

Current Mailing Address:

105 SOUTHERN GROVE DRIVE
JACKSONVILLE, FL 32259

New Mailing Address:

105 SOUTHERN GROVE DRIVE
ST JOHNS, FL 32259

FEI Number: 20-3394800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, PATRICIA C
105 SOUTHERN GROVE DRIVE
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

HARRIS, PATRICIA C
105 SOUTHERN GROVE DRIVE
ST JOHNS, FL 32259 US

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:

03/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRIS, PATRICIA C
Address: 105 SOUTHERN GROVE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGRM () Delete
Name: HARRIS, DAVID B
Address: 105 SOUTHERN GROVE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGRM () Delete
Name: PENCE, JULIE
Address: 305 EBB TIDE CT
City-St-Zip: PONTE VEDRA, FL 32082 US

Title: MGRM () Delete
Name: PENCE, ROBERT
Address: 305 EBB TIDE CT
City-St-Zip: PONTE VEDRA, FL 32082

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HARRIS, PATRICIA C
Address: 105 SOUTHERN GROVE DRIVE
City-St-Zip: ST JOHNS, FL 32259 US

Title: MGRM (X) Change () Addition
Name: HARRIS, DAVID B
Address: 105 SOUTHERN GROVE DRIVE
City-St-Zip: ST JOHNS, FL 32259 US

Title: MGRM (X) Change () Addition
Name: PENCE, JULIE
Address: 11672 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: MGRM (X) Change () Addition
Name: PENCE, ROBERT
Address: 11672 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32258

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: PATRICIA HARRIS

MGRM

03/11/2008

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