

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086513

FILED
Feb 22, 2009
Secretary of State

Entity Name: PROVESCOR, LLC

Current Principal Place of Business:

105 SOUTHERN GROVE DRIVE
ST JOHNS, FL 32259

New Principal Place of Business:

Current Mailing Address:

105 SOUTHERN GROVE DRIVE
ST JOHNS, FL 32259

New Mailing Address:

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
ST JOHNS, FL 32259 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: HARRIS, PATRICIA C
Address: 105 SOUTHERN GROVE DRIVE
City-St-Zip: ST JOHNS, FL 32259 US

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

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

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

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
Name:
Address:
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: PATRICIA C. HARRIS

MGRM

02/22/2009

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