

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093736

Entity Name: RUSSELL & JAKE, LLC

FILED  
Jul 12, 2007  
Secretary of State

**Current Principal Place of Business:**

1001 NORTH MARSH WAY  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

1001 NORTH MARSH WAY  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

FEI Number: 20-3595760      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

SHEILS, JAMES  
1001 NORTH MARSH WAY  
PONTE VEDRA BEACH, FL 32082      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: TITUS SOLUTIONS, LLC,  
Address: 1001 NORTH MARSH WAY  
City-St-Zip: JACKSONVILLE, FL 32082

Title: MGR      ( ) Delete  
Name: MONANUM, INC.,  
Address: 1001 NORTH MARSH WAY  
City-St-Zip: JACKSONVILLE, FL 32082

**ADDITIONS/CHANGES:**

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: JAMES SHEILS

MGR

07/12/2007

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