

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000104834

Entity Name: FMK, LLC

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4169 UNIVERSITY BOULEVARD SOUTH  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

4169 UNIVERSITY BOULEVARD SOUTH  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 20-3711172

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MAXWELL, DOUGLAS R  
10739 DEERWOOD PARK BLVD  
SUITE 200A  
JACKSONVILLE, FL 32256 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: KEMP, FRANK H JR  
Address: 4169 UNIVERSITY BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM  
Name: KEMP, MARY E  
Address: 4169 UNIVERSITY BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32216

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: MARY E. KEMP

MGRM

04/19/2011

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