

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2008 JAN 16 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L06000062622

1. Entity Name
IMA C. INVESTMENT COMPANY, LLC.



Principal Place of Business
5217 HIGHWAY 90
MILTON, FL 32571 US

Mailing Address
P.O. BOX 3656
MILTON, FL 32572 US



01072008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5077655

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCOMBS, MICHAEL C
5217 HIGHWAY 90
MILTON, FL 32571

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-issuing)

(DATE)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MCCOMBS, MICHAEL C
STREET ADDRESS	5217 HIGHWAY 90
CITY-ST-ZIP	MILTON, FL 32571
TITLE	MGRM
NAME	MCCOMBS, JACK C
STREET ADDRESS	5217 HIGHWAY 90
CITY-ST-ZIP	MILTON, FL 32571
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

800116368698
01/29/08--01039--017 **288.75

DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Excluded From F

1/22