

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118258

Entity Name: GEOCOR, LLC

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

837 NORTH STREET
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

837 NORTH STREET
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-3104862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMBS, TIMOTHY L
837 NORTH STREET
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

COMBS, TIMOTHY L PRESIDE
837 NORTH STREET
JACKSONVILLE, FL 32211 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: TIM COMBS

04/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

Title: VP () Change (X) Addition

Name: EYRICK, PETER T

Address: 837 NORTH STREET

City-St-Zip: JACKSONVILLE, FL 32211

I hereby certify that the information supplied with this filing does not qualify for the 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: TIM COMBS

PRES

04/20/2007

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