

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044527

FILED
Apr 15, 2008
Secretary of State

Entity Name: NORTH FLORIDA NOTIFIER, LLC

Current Principal Place of Business:

C/O JOYCE RUTH JONES
5705 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207

New Principal Place of Business:

C/O JOYCE RUTH JONES
6015 CHESTER CIRCLE #208
JACKSONVILLE, FL 32217

Current Mailing Address:

C/O JOYCE RUTH JONES
5705 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207

New Mailing Address:

C/O JOYCE RUTH JONES
6015 CHESTER CIRCLE #208
JACKSONVILLE, FL 32217

FEI Number: 20-8960667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JOYCE RUTH
5705 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

JONES, JOYCE RUTH
6015 CHESTER CIRCLE #208
JACKSONVILLE, FL 32217 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:

04/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JONES, JOYCE RUTH
Address: 5705 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR () Delete
Name: JONES, MICHAEL M
Address: 5705 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JONES, JOYCE RUTH
Address: 6015 CHESTER CIRCLE #208
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGR (X) Change () Addition
Name: JONES, MICHAEL M
Address: 6015 CHESTER CIRCLE #208
City-St-Zip: JACKSONVILLE, FL 32217

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: JOYCE RUTH JONES

MGR

04/15/2008

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