

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000098651

FILED
May 21, 2009
Secretary of State

Entity Name: JAKE COX AND ASSOCIATES, LLC

Current Principal Place of Business:

2320 SALEM ROAD
HAVANA, FL 32333 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2537
HAVANA, FL 323332537 US

New Mailing Address:

FEI Number: 26-1140453 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:

CARVER, MARY E
2320 SALEM ROAD
HAVANA, FL 32333 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: MGRM () Delete
Name: COX, JAKE
Address: P.O. BOX 180056
City-St-Zip: TALLAHASSEE, FL 32304 US

Title: MGRM () Delete
Name: CARVER, MARY E
Address: 205 WESTWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32304 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COX, JAKE
Address: 2320 SALEM ROAD
City-St-Zip: HAVANA, FL 32333 US

Title: MGRM (X) Change () Addition
Name: CARVER, MARY E
Address: 2320 SALEM ROAD
City-St-Zip: HAVANA, FL 32333 US

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: JAKE COX

MM

05/21/2009

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