

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103095

FILED  
May 01, 2009  
Secretary of State

Entity Name: MDIG HOLDINGS LLC

**Current Principal Place of Business:**

12276 SAN JOSE BLVD  
STE 532  
JACKSONVILLE, FL 32223 US

**New Principal Place of Business:**

245 SAINT JOHNS GOLF DRIVE  
SAINT AUGUSTINE, FL 32092 US

**Current Mailing Address:**

12276 SAN JOSE BLVD  
STE 532  
JACKSONVILLE, FL 32223 US

**New Mailing Address:**

245 SAINT JOHNS GOLF DRIVE  
SAINT AUGUSTINE, FL 32092 US

FEI Number: 26-1210313      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:**

WALLACE, MICHAEL J  
12276 SAN JOSE BLVD  
STE 532  
JACKSONVILLE, FL 32223 US

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

WALLACE, MICHAEL J  
245 SAINT JOHNS GOLF DRIVE  
SAINT AUGUSTINE, FL 32092 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: MICHAEL J. WALLACE

05/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WALLACE, MICHAEL J  
Address: 12276 SAN JOSE BLVD, STE 532  
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: MGRM ( ) Delete  
Name: BONE, TIMOTHY R  
Address: 12276 SAN JOSE BLVD, STE 532  
City-St-Zip: JACKSONVILLE, FL 32223 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WALLACE, MICHAEL J  
Address: 245 SAINT JOHNS GOLF DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: MGRM (X) Change ( ) Addition  
Name: BONE, TIMOTHY R  
Address: 245 SAINT JOHNS GOLF DRIVE  
City-St-Zip: SAINT AUGUSTINE, FL 32092 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: MICHAEL J. WALLACE

MGRM

05/01/2009

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