

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000041598

Entity Name: INERTIA VENTURES LLC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

421 W. CHURCH ST
#718
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

351 E CHURCH ST
JACKSONVILLE, FL 32202 US

Current Mailing Address:

221 N. HOGAN ST.
#337
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 26-2537971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

FAIR, BRIAN L MR
351 E CHURCH ST
JACKSONVILLE, FL 32202 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: MR BRIAN L FAIR

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FAIR, BRIAN L
Address: 421 W. CHURCH ST. #718
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGRM () Delete
Name: FAIR, JENNIFER M
Address: 421 W. CHURCH ST. #718
City-St-Zip: JACKSONVILLE, FL 32202 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FAIR, BRIAN L
Address: 351 E CHURCH ST
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGRM (X) Change () Addition
Name: FAIR, JENNIFER M
Address: 351 E CHURCH ST
City-St-Zip: JACKSONVILLE, FL 32202 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: BRIAN L FAIR

MR

04/24/2009

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