

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042184

Entity Name: IGC REPS, LLC

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

2430 ESTANCIA BLVD
CLEARWATER, FL 33761

New Principal Place of Business:

2430 ESTANCIA BLVD STE 100
CLEARWATER, FL 33761

Current Mailing Address:

2430 ESTANCIA BLVD
CLEARWATER, FL 33761

New Mailing Address:

2430 ESTANCIA BLVD STE 100
CLEARWATER, FL 33761

FEI Number: 26-2606509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOREY, JEFF
2430 ESTANCIA BLVD
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

MOREY, JEFF
2430 ESTANCIA BLVD STE 100
CLEARWATER, FL 33761 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:

03/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOREY, JEFF
Address: 2430 ESTANCIA BLVD
City-St-Zip: CLEARWATER, FL 33761

Title: MGRM () Delete
Name: MOREY, CHERYL
Address: 2430 ESTANCIA BLVD
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOREY, JEFF
Address: 2430 ESTANCIA BLVD STE 100
City-St-Zip: CLEARWATER, FL 33761

Title: MGRM (X) Change () Addition
Name: MOREY, CHERYL
Address: 2430 ESTANCIA BLVD STE 100
City-St-Zip: CLEARWATER, FL 33761

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: CHERYL MOREY

MGRM

03/11/2009

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