

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000112289

Entity Name: IMPLEMENT4RESULTS, LLC

**FILED**  
**Feb 27, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8573 WALDEN GLEN DRIVE  
JACKSONVILLE, FL 32256 US

**New Principal Place of Business:**

**Current Mailing Address:**

8573 WALDEN GLEN DRIVE  
JACKSONVILLE, FL 32256 US

**New Mailing Address:**

FEI Number: 26-3843169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCOY, JOHN  
8573 WALDEN GLEN DRIVE  
JACKSONVILLE, FL 32256 US

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

MCCOY, JOHN W  
8573 WALDEN GLEN DRIVE  
JACKSONVILLE, FL 32256 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: JOHN W. MCCOY

02/27/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MCCOY, JOHN  
Address: 8573 WALDEN GLEN DRIVE  
City-St-Zip: 8573 WALDEN GLEN DRIVE, FL 32256 US

I hereby 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: JOHN W. MCCOY

MGRM

02/27/2010

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