

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000008949

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** JACKSONVILLE ELEVATOR INNOVATIVE SERVICE, LLC

**Current Principal Place of Business:**

97200 BLACKBEARDS WAY  
YULEE, FL 32097 US

**New Principal Place of Business:**

463189 E SR 200  
YULEE, FL 32097 US

**Current Mailing Address:**

97200 BLACKBEARDS WAY  
YULEE, FL 32097 US

**New Mailing Address:**

P. O. BOX 2890  
YULEE, FL 32041 US

**FEI Number:** 26-4137507

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLAZIER & GLAZIER, P.A.  
8825 PERIMETER PARK BLVD.  
SUITE 504  
JACKSONVILLE, FL 32216 US

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

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: MGRP  
Name: THERRIAULT, RONALD  
Address: 463189 E SR 200  
City-St-Zip: YULEE, FL 32097 US

Title: MGRV  
Name: THERRIAULT, TERRY  
Address: 463189 E SR 200  
City-St-Zip: YULEE, FL 32097 US

Title: MGRV  
Name: THERRIAULT, TROY  
Address: 463189 E SR 200  
City-St-Zip: YULEE, FL 32097 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: RONALD THERRIAULT

P

02/15/2012

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