

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000115186

Entity Name: I.K.C., LLC

**FILED**  
**Apr 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4216 OLD MILL COVE TRAIL WEST  
JACKSONVILLE, FL 32277

**New Principal Place of Business:**

4481 CATHEYS CLUB LN.  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

4216 OLD MILL COVE TRAIL WEST  
JACKSONVILLE, FL 32277

**New Mailing Address:**

4481 CATHEYS CLUB LN.  
JACKSONVILLE, FL 32224

FEI Number: 27-1429968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WILLIAMS, CHRISTOPHER R  
4216 OLD MILL COVE TRAIL WEST  
JACKSONVILLE, FL 32277 US

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

WILLIAMS, CHRISTOPHER R  
4481 CATHEYS CLUB LN.  
JACKSONVILLE, FL 32224 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:

04/08/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WILLIAMS, CHRISTOPHER R  
Address: 4481 CATHEYS CLUB LN  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: MGRM  
Name: WILLIAMS, NEEKA W  
Address: 4481 CATHEYS CLUB LN  
City-St-Zip: JACKSONVILLE, FL 32224 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: NEEKA W. WILLIAMS

MGRM

04/08/2012

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