

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000019854

Entity Name: LMM GRAPHICS LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6028 CHESTER AVE  
206E  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

6028 CHESTER AVE  
109  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

1794 NETTINGTON CT  
JACKSONVILLE, FL 32246

**New Mailing Address:**

FEI Number: 27-1947853

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRIS, LORNA M  
1794 NETTINGTON CT  
JACKSONVILLE, FL 32246 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: MGRM  
Name: MORRIS, LORNA M  
Address: 1794 NETTINGTON CT  
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM  
Name: PADGETTE, JOHN W  
Address: 325 STOCKTON ST  
City-St-Zip: JACKSONVILLE, FL 32204

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: LORNA M MORRIS

MGRM

04/29/2011

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