

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000025416

Entity Name: 418BAND LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1211 SANTIAGO DR  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

**Current Mailing Address:**

1211 SANTIAGO DR  
JACKSONVILLE, FL 32221

**New Mailing Address:**

FEI Number: 34-1999934

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PHILLIPS, DESMOND  
2516 N ECTOR RD  
JACKSONVILLE, FL 32211 US

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

PHILLIPS, DESMOND  
1211 SANTIAGO DR.  
JACKSONVILLE, FL 32221 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/28/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PHILLIPS, DESMOND  
Address: 1211 SANTIAGO DR  
City-St-Zip: JACKSONVILLE, FL 32221

Title: MGRM  
Name: RANNIE, VICTOR  
Address: 7832 VIRGO ST  
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM  
Name: BROWNE, CYRIL  
Address: 2516 N ECTOR RD  
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGRM  
Name: WHITE, VEROL  
Address: 12174 TRIMLAWN LANE  
City-St-Zip: JACKSONVILLE, FL 32225

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: DESMOND PHILLIPS

MGRM

04/28/2011

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