

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003090

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: JACKSONVILLE VISUALS, L.L.C.

**Current Principal Place of Business:**

1739 CHESHIRE BRIDGE ROAD SUITE B  
ATLANTA, GA 30324

**New Principal Place of Business:**

**Current Mailing Address:**

1739 CHESHIRE BRIDGE ROAD SUITE B  
ATLANTA, GA 30324

**New Mailing Address:**

FEI Number: 05-0587478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EDINGER, GARY  
305 NORTHEAST 1ST STREET  
GAINESVILLE, FL 32601 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 ( ) Delete  
Name: CLABAUGH, ERIK  
Address: 1739 CHESHIRE BRIDGE RD SUITE B  
City-St-Zip: ATLANTA, GA 30324

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MORRISON, MICHAEL S  
Address: 1739 CHESHIRE BRIDGE RD SUITE B  
City-St-Zip: ATLANTA, GA 30324

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MICHAEL S. MORRISON

MGRM

01/14/2009

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