

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004225

Entity Name: IMNY, FLORIDA, LLC

FILED
Jan 17, 2007
Secretary of State

Current Principal Place of Business:

434 DURHAM ROAD
NEWTOWN, PA 18940

New Principal Place of Business:

1761 YARDLEY LANGHORNE RD
YARDLEY, PA 19067 US

Current Mailing Address:

434 DURHAM ROAD
NEWTOWN, PA 18940

New Mailing Address:

1761 YARDLEY LANGHORNE RD
YARDLEY, PA 19067 US

FEI Number: 20-2919385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TERMINELLO, LOUIS J ESQ.
C/O TERMINELLO & TERMINELLO, P.A.
2700 S.W. 37TH AVENUE
MIAMI, FL 33133 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: KATZOFF, GERALD
Address: 434 DURHAM ROAD
City-St-Zip: NEWTOWN, PA 18940

Title: MGRM () Delete
Name: GALLIGAN, BRIAN
Address: 434 DURHAM
City-St-Zip: NEWTOWN, PA 18940

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KATZOFF, GERALD
Address: 1761 YARDLEY LANGHORNE RD
City-St-Zip: YARDLEY, PA 19067 US

Title: MGRM (X) Change () Addition
Name: GALLIGAN, BRIAN
Address: 1761 YARDLEY LANGHORNE RD
City-St-Zip: YARDLEY, PA 19067 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY J. LAVELLE CONTROLLER

CONT

01/17/2007

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