2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000030

Entity Name: AMWARE LOGISTICS SERVICES OF JAX, LLC

FILED Jan 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

936 CHAMBERS CT 936 CHAMBERS CT SUITE A-11 SUITE A-11

EAGLE, CO 81631 EAGLE, CO 816315259

Current Mailing Address: New Mailing Address:

P.O. BOX 5259 P.O. BOX 5259

936 CHAMBERS CT., A-11 936 CHAMBERS CT., A-11 EAGLE, CO 81631 EAGLE, CO 816315259

FEI Number: 58-2430191 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: WILHELM, MARK
Address: 936 CHAMBERS CT, SUITE A-11

Name: WILHELM, MARK
Address: 936 CHAMBERS CT, SUITE A-11

City-St-Zip: EAGLE, CO 81631 City-St-Zip: EAGLE, CO 816315259

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: SMITH, JIM Name: SMITH, JIM

 Address:
 936 CHAMBERS CT, SUITE A-11
 Address:
 936 CHAMBERS CT, SUITE A-11

 City-St-Zip:
 EAGLE, CO 81631
 City-St-Zip:
 EAGLE, CO 816315259

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: MIKE BECKWITH MR 01/19/2007