2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2013
Secretary of State
CC4520227170

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Entity Name: TMFS-JACKSONVILLE, LLC

Current Principal Place of Business:

9823 TAPESTRY PARK CIRCLE
SUITE #20
JACKSONVILLE, FL 32246

Current Mailing Address:

9823 TAPESTRY PARK CIRCLE
SUITE #20
JACKSONVILLE, FL 32246 US

FEI Number: 45-3808829

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, DONALD LJR.
5836 HERONVIEW CRESCENT DRIVE
LITHIA, FL 33547 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

Authorized Person(s) Detail :

Title	MGRM
Name	WILLIAMS, DONALD LJR.
Address	5836 HERONVIEW CRESCENT DRIVE
City-State-Zip:	LITHIA FL 33547

Title	MGRM
Name	UPHUS, JOSEPH
Address	1110 SAUK LANE
City-State-Zip:	SAUK CENTER MN 56378

Title	MGRM
Name	RILEY, PHILLIP J
Address	124 PHEASANT LANE
City-State-Zip:	ARCHBOLD OH 43502

Title	MGRM
Name	MEISTER, MATTHEW G
Address	1449 KENSINGTON DRIVE
City-State-Zip:	DAYTON OH 45440

Title	MGRM
Name	MEEKER, DAVID W
Address	775 FAIRWAY LANE
City-State-Zip:	WAUSEON OH 43567

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DONALD L WILLIAMS JR — MANAGING MEMBER — 01/15/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date