


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2008 08:00 A
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000012500 1. Entity Name E & M, LLC |  |
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|--|---|
| Principal Place of Business 7041 HIRAMS ROAD SOUTHPORT, FL 32409 | Mailing Address P.O. BOX 382 LYNN HAVEN, FL 32444 |
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DO NOT WRITE IN THIS SPACE



03082008 No Chg-LLC CR2E083 (12/07)

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| 4. FEI Number 20-0449120 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent CHATONEY, WILLIAM M 7041 HIRAMS ROAD SOUTHPORT, FL 32409 |
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM CHATONEY, WILLIAM M 7041 HIRAMS ROAD PANAMA CITY, FL 32409 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM CHATONEY, ELIZABETH D 7041 HIRAMS ROAD PANAMA CITY, FL 32409 |
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U00000863564
 04/03/08-80095-020 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Elizabeth D. Chatoney* **3-13-08** **850-271-0555**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #