

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000009075

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: REDFISH ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

1234 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

1234 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 59-3605463

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JAMES, ROBERT C  
1234 TIMBERLANE ROAD  
TALLAHASSEE, FL 32312 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: BRITT-WOODS, JANICE K  
Address: 7708 SUMMER TANAGER DR.  
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete  
Name: JAMES, HARRY R  
Address: 1402 RANDOLPH CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM ( ) Delete  
Name: JAMES, ROBERT C  
Address: 3711 LONGCHAMP CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32309

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT C JAMES

DR

01/04/2007

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