

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002979

Entity Name: C.C.C. OF FLORIDA, L.L.C.

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

464 PENCARROW CIRCLE
MADISONVILLE, LA 70447

New Principal Place of Business:

Current Mailing Address:

464 PENCARROW CIRCLE
MADISONVILLE, LA 70447

New Mailing Address:

FEI Number: 75-3075189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOOKMAN, ALAN B ESQ.
30 SOUTH SPRING
PENSACOLA, FL 32596 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: MGR () Delete
Name: SCALLAN, JOHN J
Address: 711 KIMBERLY ANN CIRCLE
City-St-Zip: MANDEVILLE, LA 70471

Title: MGR () Delete
Name: ANDERSON, CHRISTOPHER W
Address: 464 PENCARROW CIRCLE
City-St-Zip: MADISONVILLE, LA 70447

ADDITIONS/CHANGES:

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 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: CHRISTOPHER ANDERSON

MGR

01/09/2008

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