

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M97000000707

**FILED**  
**Jan 16, 2008**  
**Secretary of State**

**Entity Name:** BRASFIELD & GORRIE, L.L.C.

**Current Principal Place of Business:**

3021 7TH AVE SOUTH  
BIRMINGHAM, AL 35233

**New Principal Place of Business:**

**Current Mailing Address:**

3021 7TH AVE SOUTH  
BIRMINGHAM, AL 35233

**New Mailing Address:**

**FEI Number:** 72-1400223      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: GORRIE, M.M.  
Address: 729 SOUTH 30TH STREET  
City-St-Zip: BIRMINGHAM, AL 35233

Title: MGR ( ) Delete  
Name: GORRIE, M.J.  
Address: 729 30TH STREET SOUTH  
City-St-Zip: BIRMINGHAM, AL 35233

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GORRIE, M.M.  
Address: 3021 7TH AVENUE SOUTH  
City-St-Zip: BIRMINGHAM, AL 35233

Title: MGR (X) Change ( ) Addition  
Name: GORRIE, M.J.  
Address: 3021 7TH AVENUE SOUTH  
City-St-Zip: BIRMINGHAM, AL 35233

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: M.J. GORRIE

MGR

01/16/2008

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