

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002024

FILED
Apr 09, 2007
Secretary of State

Entity Name: PREBLE RISH JONES INVESTMENTS LLC

Current Principal Place of Business:

301 EAST 1ST ST., 3RD FLOOR
PORT ST. JOE, FL 32456

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 639
PORT SAINT JOE, FL 32457

New Mailing Address:

FEI Number: 01-0674029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBSON, THOMAS S
206 E. FOURTH STREET
PORT ST. JOE, FL 32456 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: RISH, RALPH P
Address: PO BOX 639
City-St-Zip: PORT SAINT JOE, FL 32457

Title: MGR () Delete
Name: PREBLE, GREGORY S
Address: PO BOX 639
City-St-Zip: PORT SAINT JOE, FL 32457

Title: MGR () Delete
Name: JONES, PHILIP A
Address: P.O. BOX 639
City-St-Zip: PORT SAINT JOE, FL 32457

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: RALPH P. RISH

MGR

04/09/2007

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