

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016132

FILED
Jan 02, 2008
Secretary of State

Entity Name: PATRICK & ROBINSON, L.L.C.

Current Principal Place of Business:

4029 ATLANTIC BLVD.
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4029 ATLANTIC BLVD.
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 03-0464634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRICK, MARK R
4029 ATLANTIC BLVD.
JACKSONVILLE, FL 32207 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: PATRICK & ASSOCIATES, , P.A.
Address: 4029 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM () Delete
Name: CFO CONSULTANTS, INC, .
Address: 4029 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PATRICK, MARK R
Address: 4029 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR (X) Change () Addition
Name: ROBINSON, ADAM M
Address: 4029 ATLANTIC BLVD.
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM () Change (X) Addition
Name: PATRICK & ASSOCIATES, , PA
Address: 4029 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGRM () Change (X) Addition
Name: CFO CONSULTANTS, INC, .
Address: 4029 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207

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: ADAM M ROBINSON

MGR

01/02/2008

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