

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045990

Entity Name: EDWARD MORTON, LLC

FILED  
Apr 09, 2008  
Secretary of State

## Current Principal Place of Business:

736 MERRY ROBIN RD  
TALLAHASSEE, FL 32310

## New Principal Place of Business:

## Current Mailing Address:

736 MERRY ROBIN RD  
TALLAHASSEE, FL 32310

## New Mailing Address:

FEI Number: 27-0069535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORTON, EDWARD  
736 MERRY ROBIN RD  
TALLAHASSEE, FL 32310 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: MORTON, EDWARD C  
Address: 736 MERRY ROBIN RD  
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGRM ( ) Delete  
Name: MORTON, CHARLES E  
Address: 736 MERRY ROBIN RD  
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGRM (X) Delete  
Name: SHEFFIELD III, HORACE B  
Address: 736 MERRY ROBIN RD  
City-St-Zip: TALLAHASSEE, FL 32310

## 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 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: CHARLES E. MORTON

MGMR

04/09/2008

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