## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000047461

1. Entity Name
GILLILAND TILE & WOOD, LLC



FILED Apr 22, 2008 08:00 AN Secretary of State

Principal Place of Business

2276 WALLABY AVE MIDDLEBURG, FL 32068 Mailing Address

2276 WALLABY AVE MIDDLEBURG, FL 32068



04102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-0422618		Not Applicable
5. Certificate of Status Desired	\$5.0 Fee R	Additional ilred

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

GILLILAND, JAMES L 2276 WALLABY AVE MIDDLEBURG, FL 32068

## DO NOT WRITE IN THIS SPACE

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75		U00000914154 05/08/08-80042-025 143.75		
9.	MANAGING MEMBERS/MANAGERS		,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GILLILAND, JAMES L 2276 WALLABY AVE MIDDLEBURG, FL 32068		i		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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	sertify that the information sumplied with this filling does not o	qualify far the avamations gentained in Chapter 11	O. Florido Ciatata I further and in the table information		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Tames L. G. III. land

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Imonager

904-282-5896

Daytime Phone #