

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000054463

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** CRAIG T. JAMES, P.L.

**Current Principal Place of Business:**

431 E. NEW YORK AVE.  
DELAND, FL 32724 US

**New Principal Place of Business:**

**Current Mailing Address:**

431 E. NEW YORK AVE.  
DELAND, FL 32724 US

**New Mailing Address:**

P.O. BOX 208  
DELAND, FL 32721

**FEI Number:** 20-0498750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES, CRAIG T  
431 E. NEW YORK AVENUE  
DELAND, FL 32724 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  
**Name:** JAMES, CRAIG T  
**Address:** 431 E. NEW YORK AVENUE  
**City-St-Zip:** DELAND, FL 32724 US

I hereby 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:** CRAIG T. JAMES

MGR

04/26/2011

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