

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056987

Entity Name: JAMES FLOORING, LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

8148 MORMON TEMPLE RD
BAKER, FL 32531

New Principal Place of Business:

904 HIAWATHA STREET
HOLT, FL 32564

Current Mailing Address:

8148 MORMON TEMPLE RD
BAKER, FL 32531

New Mailing Address:

P O BOX 447
HOLT, FL 32564

FEI Number: 20-4520683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FARACI, JAMES
8148 MORMON TEMPLE RD
BAKER, FL 32531 US

Name and Address of New Registered Agent:

FARACI, JAMES J MGRM
904 HIAWATHA STREET
HOLT, FL 32564 US

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: JAMES J FARACI

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FARACI, JAMES
Address: 8148 MORMON TEMPLE RD
City-St-Zip: BAKER, FL 32531

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FARACI, JAMES J MGRM
Address: 904 HIAWATHA STREET
City-St-Zip: HOLT, FL 32564

Title: MGRM () Change (X) Addition
Name: FARACI, BRIAN J MGRM
Address: 6274 MISTY LANE
City-St-Zip: CRESTVIEW, FL 32539

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: JAMES J FARACI

MGRM

05/01/2008

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