

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000002871**

1. Entity Name  
**STORCH, MORRIS & HARRIS, LLC**



Principal Place of Business  
**420 SOUTH NOVA ROAD  
DAYTONA BEACH, FL 32114**

Mailing Address  
**420 SOUTH NOVA ROAD  
DAYTONA BEACH, FL 32114**



01182008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-0590232</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**STORCH, GLENN D  
420 SOUTH NOVA ROAD  
DAYTONA BEACH, FL 32114**

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM GLENN D. STORCH, P.A. 420 SOUTH NOVA ROAD DAYTONA BEACH, FL 32114</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM JAMES S. MORRIS, P.A. 420 SOUTH NOVA ROAD DAYTONA BEACH, FL 32114</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM WARD, KIM 420 SOUTH NOVA ROAD DAYTONA BEACH, FL 32114</b>
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U00000793307  
01/25/08-80003-021 138.75

**DO NOT WRITE  
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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.

**SIGNATURE:**

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

Date

Daytime Phone #

1/21/08

386 -  
238-8383 rt20