

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014042

FILED
Jan 19, 2007
Secretary of State

Entity Name: CORRECTION SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

2833 REMINGTON GREEN CIR.
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2833 REMINGTON GREEN CIR.
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 73-1697797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHOSSLER, WILLIAM
2833 REMINGTON GREEN CIR.
TALLAHASSEE, FL 32308 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 () Delete
Name: SCHOSSLER, WILLIAM R
Address: 2833 REMINGTON GREEN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: QUALLS, AL
Address: 209 HARRIS ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM () Delete
Name: DURRANCE, LINDA
Address: P.O. BOX 1314
City-St-Zip: BRONSON, FL 32621

Title: MGRM () Delete
Name: MOODY, HORACE
Address: 2833 REMINGTON GREEN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: GARDNER, TOM
Address: 3509 DEER LANE DR
City-St-Zip: TALLAHASSEE, FL 32312

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:

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 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: WILLIAM R SCHOSSLER

MGRM

01/19/2007

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