

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000017959

Entity Name: JIM MAYES LLC

**FILED**  
**Jul 29, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

5471 51 TER. N,  
SAINT PETERSBURG, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

5471 51 TER. N,  
SAINT PETERSBURG, FL 33709

**New Mailing Address:**

FEI Number: 26-6931341      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:**

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

MAYES, JAMES E  
5471 51 TER. N.  
SAINT PETERSBURG, FL 33709      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR      ( ) Delete  
Name: MAYES, JAMES E OWNER  
Address: 5471 51 TERRACE N  
City-St-Zip: ST.PETERSBURG, FL 33709 US

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 E MAYES

OWNE

07/29/2008

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