2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066706

Entity Name: N475JM, LLC

City-St-Zip:

THOMASVILLE, GA 31758

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3320 THOMASVILLE ROAD TALLAHASSEE, FL 32308 **Current Mailing Address: New Mailing Address:** 3320 THOMASVILLE ROAD TALLAHASSEE, FL 32308 FEI Number: 20-1600725 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARRAWAY, F. WILSON III 3320 THOMASVILLE ROAD US TALLAHASSEE, FL 32308 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: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition TIERA CIELO, LLC, Name: Name: P.O. BOX 160 Address: Address: City-St-Zip: MONTICELLO, FL 32345 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition EARLE, BARRY III Name: Name: Address: 175 LAWRENCE DRIVE Address: City-St-Zip: THOMASVILLE, GA 31757 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition VANN, THOMAS H JR. VANN, THOMAS H JR. Name: Name: 407 E. JEFFERSON STREET Address: 407 E. JEFFERSON STRET Address: City-St-Zip: THOMASVILLE, GA 31792 City-St-Zip: THOMASVILLE, GA 31792 Title: MGRM () Delete Title: () Change () Addition VANN, ANDREW J Name: Name: Address: P.O. BOX 709 Address: City-St-Zip: THOMASVILLE, GA 31799 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MITCHELL, EMMETT III Name: Name: Address: P.O. BOX 5768 Address:

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.

City-St-Zip:

SIGNATURE: ANDREW VANN MGMR 01/17/2008