

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073667

FILED  
May 01, 2009  
Secretary of State

Entity Name: JAMES FAMILY PARTNERSHIP, LLC

**Current Principal Place of Business:**

4117 INDIAN TRAIL  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5506  
DESTIN, FL 32540

**New Mailing Address:**

FEI Number: 61-1477139      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:**

JAMES, BRIAN K  
4117 INDIAN TRAIL  
DESTIN, FL 32541 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: JAMES, BRIAN K  
Address: P.O. BOX 5506  
City-St-Zip: DESTIN, FL 32540 FL

Title: MGR ( ) Delete  
Name: NANCY D. JAMES MARITAL TRUST  
Address: COUNTY ROAD 558, BOX 271  
City-St-Zip: HANCEVILLE, AL 35077 US

Title: MGR ( ) Delete  
Name: JAMES, BONNIE K  
Address: COUNTY ROAD 558, BOX 271  
City-St-Zip: HANCEVILLE, AL 35077 US

**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:

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: BRIAN K JAMES

MGR

05/01/2009

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