2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086109

Entity Name: HARRISON MORROW, LLC

FILED Apr 26, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15 LOGGERHEAD LN 21 VILLAGE WALK CIRCLE

PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082

Current Mailing Address: New Mailing Address:

15 LOGGERHEAD LN 21 VILLAGE WALK CIRCLE

PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082

FEI Number: 56-2291795 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:

MORROW, AMANDA 15 LOGGERHEAD LN

PONTE VEDRA BEACH, FL 32082 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

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MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MORROW, AMANDA
 Name:

 Address:
 15 LOGGERHEAD LN
 Address:

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082
 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:HARRISON, MILDREDName:HARRISON, MILDREDAddress:15 LOGGERHEAD LNAddress:21 VILLAGE WALK CIRCLECity-St-Zip:PONTE VEDRA BEACH, FL 32082City-St-Zip:PONTE VEDRA BEACH, FL 32082

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: AMANDA MORROW MM 04/26/2008