2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# L04000093038

Entity Name: CITY LIGHTS, L.L.C.

Current Principal Place of Business:

111 NORTH PALAFOX
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 334
CANTONMENT, FL 32533

New Mailing Address:

P.O. BOX 972
GONZALEZ, FL 32560

FEI Number: 20-2305019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BORDELON & SCHULTZ LAW FIRM, P.L.
2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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: MORRIS, BARBARETTE D MS
Address: P.O BOX 334
City-St-Zip: CANTONMENT, FL 32533

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MORRIS, BARBARETTE D MS
Address: P.O BOX 972
City-St-Zip: GONZALEZ, FL 32560

Title: MGRM ( ) Change (X) Addition
Name: WARREN, WARREN W
Address: P.O BOX 927
City-St-Zip: PENSACOLA, FL 32591

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: BARBARETTE D. MORRIS MGRM 01/14/2009

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