2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094054

Entity Name: PROCTOR & LONG, L.L.C.

FILED Jan 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 825 THOMASVILLE ROAD TALLAHASSEE, FL 32303 **Current Mailing Address: New Mailing Address:** 825 THOMASVILLE ROAD P.O. BOX 787 TALLAHASSEE, FL 32302 TALLAHASSEE, FL 32303 FEI Number: 30-0288976 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: PADGETT, TIMOTHY D 2810 REMINGTON GREEN CIRCLE 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: Title: () Change () Addition () Delete LONG, JOSEPH R MANAGER Name: Name: Address: 825 THOMASVILLE ROAD Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: () Delete Title: () Change () Addition PROCTOR, PATRICK S MANAGER Name: Name: Address: 825 THOMASVILLE ROAD Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: () Delete Title: SEC () Change (X) Addition Name: ADAMS, HENRY N Name: 825 THOMASVILLE RD Address: 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:

TALLAHASSEE, FL 32303

SIGNATURE: PATRICK STEWART PROCTOR

City-St-Zip:

MR

01/30/2008