

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019155

Entity Name: R L JAMES GROUP BILOXI, LLC

FILED
Mar 27, 2007
Secretary of State

Current Principal Place of Business:

13751 JETPORT COMMERCE PARKWAY
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

13751 JETPORT COMMERCE PARKWAY
FORT MYERS, FL 33913

New Mailing Address:

FEI Number: 20-2447433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMES, ROBERT L
13751 JETPORT COMMERCE PARKWAY
FORT MYERS, FL 33913 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: MGR () Delete
Name: JAMES, ROBERT L
Address: 12136 WATER OAK DRIVE
City-St-Zip: ESTERO, FL 33928

Title: MGR () Delete
Name: SINKS, RONALD G
Address: 11722 CHANTICLEER COURT
City-St-Zip: PENSACOLA, FL 32507

Title: MGR () Delete
Name: RICHARDSON, RALPH A JR
Address: 27280 RIDGE LAKE COURT
City-St-Zip: BONITA SPRINGS, FL 34134

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 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: ROBERT JAMES

MGR

03/27/2007

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