

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031625

FILED  
Jan 31, 2007  
Secretary of State

Entity Name: JERRY MOORE FLORIDA OPERATIONS, L.L.C.

**Current Principal Place of Business:**

17 OLD PALMETTO PATH  
ST. MARKS, FL 32355

**New Principal Place of Business:**

369 BOTTOMS ROAD  
PANACEA, FL 32346

**Current Mailing Address:**

2440 WALL STREET, SUITE A  
CONYERS, GA 30013

**New Mailing Address:**

P.O. BOX 585  
PANACEA, FL 32346

FEI Number: 20-2471739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MOORE, JERRY  
2001 D CRAWFORDVILLE HWY  
CRAWFORDVILLE, FL 32327 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: MOORE, JERRY  
Address: 2001 CRAWFORDVILLE HWY  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MGRM ( ) Delete  
Name: MOORE, VIRGINIA  
Address: 2001 D CRAWFORDVILLE HWY  
City-St-Zip: CRAWFORDVILLE, FL 32327

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MOORE, JERRY  
Address: 2001 D CRAWFORDVILLE HWY  
City-St-Zip: CRAWFORDVILLE, FL 32327

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: JERRY MOORE

MGRM

01/31/2007

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