2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000066807

1. Entity Name
GEORGIA-FLORIDA, LLC

Principal Place of Business	Mailing Address
628 BAY CLIFFS ROAD GULF BREEZE, FL 32561	628 BAY CLIFFS ROAD GULF BREEZE, FL 32561

DO NOT WRITE IN THIS SPACE

01222008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number		Applied For
20-3100738		Not Applicable
5. Certificate of Status Desired		**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BEGGS & LANE, A REGISTERED LIMITED LIABILI
501 COMMENDENCIA STREET
PENSACOLA, FL 32502

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BOSS, MICHAEL T
STREET ADDRESS	628 BAY CLIFFS RD
CITY-ST-ZIP	GULF BREEZE, FL 32561
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/20/08-80024-008 143.75

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IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: X _Michael T. Boss_ MANAGING MEMBER   3-3-08   850-435-4700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #