

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000078637

FILED  
Jul 10, 2007  
Secretary of State

Entity Name: R. BRYANT MCCULLEY, P.L.

**Current Principal Place of Business:**

ONE INDEPENDENT DRIVE, SUITE 3201  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

ONE INDEPENDENT DRIVE, SUITE 3201  
JACKSONVILLE, FL 32202

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MCCULLEY, R. BRYANT  
ONE INDEPENDENT DRIVE, SUITE 3201  
JACKSONVILLE, FL 32202 US

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: MCCULLEY, R. BRYANT  
Address: ONE INDEPENDENT DRIVE, SUITE 3201  
City-St-Zip: JACKSONVILLE, FL 32202

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: R BRYANT MCCULLEY

MGRM

07/10/2007

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