



**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000080751 1. Entity Name MEADOWS & SHOEMAKER, ATTORNEYS-AT-LAW, LLC	
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Principal Place of Business 403 NORTH CALHOUN STREET TALLAHASSEE, FL 32301	Mailing Address 403 NORTH CALHOUN STREET TALLAHASSEE, FL 32301
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DO NOT WRITE IN THIS SPACE



01042008 No Chg-LLC CR2E083 (12/07)

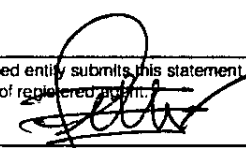
4. FEI Number 59-2311303	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**MEADOWS, LEE
403 NORTH CALHOUN STREET
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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  *Same DISregard* DATE _____

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

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

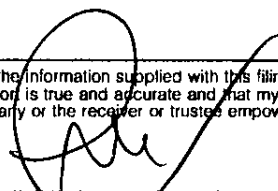
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEADOWS, LEE 403 NORTH CALHOUN STREET TALLAHASSEE, FL 32301
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U00000784910
01/16/08-80074-004 138.75

**DO NOT WRITE
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 606, Florida Statutes.

SIGNATURE:  **1/4/08 850 8873**

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