2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2008
Secretary of State

DOCUMENT# L05000121057

Entity Name: MORRISON AVENUE, L.L.C.

Current Principal Place of Business:

2717 W. JETTON AVE.
TAMPA, FL 33629

New Principal Place of Business:

2616 WEST MORRISON AVE
TAMPA, FL 33629 US

Current Mailing Address:

2717 W. JETTON AVE.
TAMPA, FL 33629

New Mailing Address:

2616 WEST MORRISON AVE
TAMPA, FL 33629 US

FEI Number: 56-2548428 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLASSMAN, LISA L P.A.
2627 NE 203RD ST., STE. 100
AVENTURA, FL 33180 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: PEPER, SCOTT C
Address: 2717 W. JETTON AVE.
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete
Name: BAKER, KEVIN
Address: 4319 W. JETTON AVE.
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: PEPER, SCOTT C
Address: 2616 WEST MORRISON AVE
City-St-Zip: TAMPA, FL 33629

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: SCOTT C PEPER MGR 02/10/2008

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