

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029266

FILED  
May 01, 2008  
Secretary of State

Entity Name: CHIPLEY ONE, LLC

**Current Principal Place of Business:**

3065 PX RANCH ROAD  
COTTONDALE, FL 32431

**New Principal Place of Business:**

**Current Mailing Address:**

3065 PX RANCH ROAD  
COTTONDALE, FL 32431

**New Mailing Address:**

FEI Number: 20-4606937      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

SMITH, JAMES M  
3065 PX RANCH ROAD  
COTTONDALE, FL 32431      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: KANDY, ANDRE DR  
Address: 3518 15TH STREET EAST  
City-St-Zip: PANAMA CITY, FL 32404 US

Title: MGRM      ( ) Delete  
Name: COOK, ARCHIE M  
Address: 851 FALLING WATERS ROAD  
City-St-Zip: CHIPLEY, FL 32428 US

Title: MGRM      ( ) Delete  
Name: SMITH, JAMES M  
Address: 3065 PX RANCH ROAD  
City-St-Zip: COTTONDALE, FL 32431 US

Title: MGRM      ( ) Delete  
Name: SMITH, TIMOTHY M  
Address: 5110 PRESIDENT CIRCLE  
City-St-Zip: MARIANNA, FL 32446

**ADDITIONS/CHANGES:**

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

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

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

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: ARCHIE M. COOK III

MGRM

05/01/2008

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