2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045618

Entity Name: ANDERSON & LOMAX, LLC

() Delete

CASSELBERRY, FL 32707 US

LOMAX, PATRICIA

22 COBBLESTONE CT

Name:

Address:

City-St-Zip:

FILED Feb 01, 2008 Secretary of State

() Change () Addition

New Principal Place of Business: Current Principal Place of Business: 7505 RED BUG LAKE ROAD **SUITE 1021** OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 7505 RED BUG LAKE ROAD **SUITE 1021** OVEIDO, FL 32765 FEI Number: 84-1711530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATRICIA, LOMAX 22 COBBLESTONE CT CASSELBERRY, FL 32707 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: ADDITIONS/CHANGES:

Title:

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: PATRICIA L. LOMAX MGR 02/01/2008