

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052502

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: CM&C, L.L.C.

**Current Principal Place of Business:**

3242 ROBINHOOD ROAD  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

3242 ROBINHOOD ROAD  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 01-0892378

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COE, THOMAS R JR.  
3242 ROBINHOOD ROAD  
TALLAHASSEE, FL 32312 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: MGRM ( ) Delete  
Name: COE, THOMAS R JR.  
Address: 3242 ROBINHOOD ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete  
Name: MCKEITHEN, RUSSELL A  
Address: 915 BLOXHAM CUTOFF  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MGRM ( ) Delete  
Name: CLEMONS, JACK D JR.  
Address: 102 MARSH HARBOR WAY  
City-St-Zip: RIVERVIEW, FL 33569

**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:

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: RUSSELL A. MCKEITHEN

MGR

04/20/2009

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