

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105224

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: WILLIAMS & JACOBS, ATTORNEYS AT LAW, LLC

## Current Principal Place of Business:

1720 SOUTH GADSDEN STREET, MS 14, SUITE 20  
1  
TALLAHASSEE, FL 32301

## Current Mailing Address:

1720 SOUTH GADSDEN STREET, MS 14, SUITE 20  
1  
TALLAHASSEE, FL 32301

## New Principal Place of Business:

1720 SOUTH GADSDEN STREET, MS 14  
SUITE 201  
TALLAHASSEE, FL 32301

## New Mailing Address:

1720 SOUTH GADSDEN STREET, MS 14,  
SUITE 201  
TALLAHASSEE, FL 32301

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, MOSES  
1720 SOUTH GADSDEN STREET, MS 14, SUITE 20  
1  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

WILLIAMS, MOSES  
1720 SOUTH GADSDEN STREET, MS 14,  
SUITE 201  
TALLAHASSEE, FL 32301 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:

04/27/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: WILLIAMS, MOSES  
Address: 1720 S. GADSDEN ST., MS 14, SUITE 201  
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM ( ) Change (X) Addition  
Name: JACOBS, LEON  
Address: 1720 S. GADSDEN ST., MS 14, SUITE 201  
City-St-Zip: TALLAHASSEE, FL 32301

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: LEON JACOBS

MGRM

04/27/2007

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