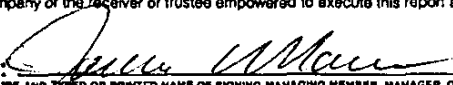


FILED
Mar 10, 2008 8:00 am
Secretary of State

02-12-2008 90065 035 ***150.00

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L07000054717			
1. Entity Name JAMES MORRIS LLC			
Principal Place of Business 3790 ASHLAND AVENUE PENSACOLA, FL 32534		Mailing Address 3790 ASHLAND AVENUE PENSACOLA, FL 32534	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02072008 Chg-LLC CR2E083 (12/06)		4. FEI Number 22-3464684	
5. Certificate of Status Desired ☐		Applied For Not Applicable	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MORRIS, JAMES 3790 ASHLAND AVENUE PENSACOLA, FL 32534 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MORRIS, KATHRYN 3790 ASHLAND AVENUE PENSACOLA, FL 32534 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 		3-5-08 850-748-7387	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	

ATTACHMENT 30001753 #LD700054717

Form 1065 (2007) JAMES MORRIS LLC

Draft Release Date: 07/12/07
22-3964684 Page 4

Analysis of Net Income (Loss)

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 16i						1	0.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt organization	(vi) Nominee/Other	
a General partners	0.	0.	0.	0.	0.	0.	
b Limited partners	0.	0.	0.	0.	0.	0.	

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1 Cash			0.		3,601.
2a Trade notes and accounts receivable		0.		0.	
b Less allowance for bad debts		0.	0.	0.	0.
3 Inventories			0.		0.
4 U.S. government obligations			0.		0.
5 Tax-exempt securities			0.		0.
6 Other current assets (attach statement)			0.		0.
7 Mortgage and real estate loans			0.		0.
8 Other investments (attach statement)			0.		0.
9a Buildings and other depreciable assets		0.		0.	
b Less accumulated depreciation		0.	0.	0.	0.
10a Depletable assets		0.		0.	
b Less accumulated depletion		0.	0.	0.	0.
11 Land (net of any amortization)			0.		0.
12a Intangible assets (amortizable only)		0.		0.	
b Less accumulated amortization		0.	0.	0.	0.
13 Other assets (attach statement)			0.		0.
14 Total assets			0.		3,601.
Liabilities and Capital					
15 Accounts payable			0.		0.
16 Mortgages, notes, bonds payable in less than 1 year			0.		0.
17 Other current liabilities (attach statement)			0.		0.
18 All nonrecourse loans			0.		0.
19 Mortgages, notes, bonds payable in 1 year or more			0.		0.
20 Other liabilities (attach statement)			0.		0.
21 Partners' capital accounts			0.		3,601.
22 Total liabilities and capital			0.		3,601.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income (Loss) per Return

Note. Schedule M-3 may be required instead of Schedule M-1 (see instructions).

1 Net income (loss) per books	0.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):	0.	a Tax-exempt int. \$	0.
3 Guaranteed payments (other than health insurance)	0.	7 Deductions included on Schedule K, lines 1 through 13d, and 16i, not charged against book income this year (itemize):	
4 Expenses recorded on books this year, not included on Schedule K, lines 1 through 13d, and 16i (itemize):		a Depreciation \$	0.
a Depreciation \$	0.		0.
b Travel and entertainment \$	0.	8 Add lines 6 and 7	0.
	0.	9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	0.
5 Add lines 1 through 4	0.		

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year	0.	6 Distributions: a Cash	0.
2 Capital contributed: a Cash	0.	b Property	0.
b Property	0.	7 Other decreases (itemize):	0.
3 Net income (loss) per books	0.		0.
4 Other increases (itemize):	0.	8 Add lines 6 and 7	0.
	0.	9 Balance at end of year. Subtract line 8 from line 5	0.
5 Add lines 1 through 4	0.		