

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000073341

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** TRACY MORTON MEMORIAL CHAPEL, LLC

**Current Principal Place of Business:**

55 COAST ROAD  
PENSACOLA, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

3416 WEST SCOTT STREET  
PENSACOLA, FL 32505

**New Mailing Address:**

55 COAST ROAD  
PENSACOLA, FL 32507

**FEI Number:** 61-1534857

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MORTON, FRANK  
3416 WEST SCOTT STREET  
PENSACOLA, FL 32505 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  
**Name:** MORTON, FRANK  
**Address:** 3416 WEST SCOTT STREET  
**City-St-Zip:** PENSACOLA, FL 32505

**Title:** MGRM  
**Name:** MORTON, TRACY  
**Address:** 3416 WEST SCOTT STREET  
**City-St-Zip:** PENSACOLA, FL 32505

**Title:** MGRM  
**Name:** MORTON, GAYLIER  
**Address:** 3416 WEST SCOTT STREET  
**City-St-Zip:** PENSACOLA, FL 32505

**Title:** MGRM  
**Name:** JACKSON, CLARENCE  
**Address:** 2700 MISSION ROAD  
**City-St-Zip:** PENSACOLA, FL 32505

I hereby 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:** TRACY MORTON

MGRM

01/05/2010

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