

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000077833

**FILED**  
**Mar 03, 2008**  
**Secretary of State**

**Entity Name:** JAMES CHRISTIANSEN LLC

**Current Principal Place of Business:**

814 THE SPUR  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

573 LEGACY PARK DRIVE  
CASSELBERRY, FL 32707

**Current Mailing Address:**

814 THE SPUR  
CASSELBERRY, FL 32707

**New Mailing Address:**

573 LEGACY PARK DRIVE  
CASSELBERRY, FL 32707

FEI Number: 04-3782329

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHRISTIANSEN, JAMES C  
814 THE SPUR  
CASSELBERRY, FL 32707 US

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

CHRISTIANSEN, JAMES C  
573 LEGACY PARK DRIVE  
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: \_\_\_\_\_

03/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CHRISTIANSEN, JAMES C  
Address: 814 THE SPUR  
City-St-Zip: CASSELBERRY, FL 32707

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CHRISTIANSEN, JAMES C  
Address: 573 LEGACY PARK DR  
City-St-Zip: CASSELBERRY, FL 32707

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: JAMES C. CHRISTIANSEN

MR

03/03/2008

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