

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000080491

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** JAMES & ASSOCIATES, LLC

**Current Principal Place of Business:**

9340 LAGOON PLACE  
406  
DAVIE, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

8930 W. STATE ROAD 84  
170  
DAVIE, FL 33324

**New Mailing Address:**

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

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

JAMES, SEBRINA R  
9340 LAGOON PLACE  
406  
DAVIE, FL 33324 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: MGR  
Name: JAMES, SEBRINA  
Address: 8930 W. STATE ROAD 84 #170  
City-St-Zip: DAVIE, FL 33324

Title: MGR  
Name: COSTOSO, YVETTE  
Address: 15900 W. BUNCHE PARK DRIVE  
City-St-Zip: OPA LOCKA, FL 33054

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: SEBRINA JAMES                      MGR                      04/30/2010

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