

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # M03000001374

1. Entity Name
BOUNDS AND GILLESPIE ARCHITECTS, PLLC



Principal Place of Business
**7975 STAGE HILLS BLVD., SUITE 4
MEMPHIS, TN 38133-4010**

Mailing Address
**7975 STAGE HILLS BLVD., SUITE 4
MEMPHIS, TN 38133-4010**



01232007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
62-1607325

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GILLESPIE, JIM
12798 W. FOREST HILL BLVD., SUITE 102
WELLINGTON, FL 33414-4704**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BOUNDS, DANNY G SR.
STREET ADDRESS	7975 STAGE HILLS BLVD., SUITE 4
CITY-ST-ZIP	MEMPHIS, TN 381334010
TITLE	MGR
NAME	GILLESPIE, PAUL D SR.
STREET ADDRESS	7975 STAGE HILLS BLVD., SUITE 4
CITY-ST-ZIP	MEMPHIS, TN 381334010
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000614880
02/06/07-80047-025 50.00

**DO NOT WRITE
IN THIS SPACE**

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 any 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: **Paul D. Gillespie Sr.**

1-26-07

(901) 377-6603

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #