2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # M97000000771

1. Entity Name
CFS OF PENSACOLA, FL, L.L.C.

Principal Place of Business	Mailing Address
45 E INDUSTRIAL BLVD	45 E INDUSTRIAL BLVD
PENSACOLA, FL 32503 US	PENSACOLA, FL 32503 US

DO NOT WRITE IN THIS SPACE

03052008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number		Applied For
36-4192363		Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301

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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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	THROWER, JR, RALPH G
STREET ADDRESS	10763 COUNTRY OSTRICH DR
CITY-ST-ZIP	PENSACOLA, FL 32534
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/26/08-80083-001 138.75

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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   850-453-078L

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #