2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Jan 29, 2007 08:00 AM **DOCUMENT # L02000015958 Secretary of State** BELLWETHER PROPERTIES, LLC Principal Place of Business Mailing Address 2225 SW 80TH ST P.O. BOX 6331 OCALA, FL 34476 OCALA, FL 34478 01252007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0089348 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MENDOLA, TONY DO NOT WRITE 2225 SW 80TH ST OCALA, FL 34476 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 algoriture required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS TITLE MGRM MENDOLA, TONY NAME 2225 SW 80TH ST STREET ADDRESS U000000607145 CITY-ST-ZIP OCALA, FL 34476 01/31/07-80025-017 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

^{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 emptions as required by Chapter 608, Florida Statutes.

SIGNATURE: