


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000049981 1. Entity Name CARR & PUGH PROPERTIES, LLC	
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Principal Place of Business 1117 BOLL WEVIL CIRCLE ENTERPRISE, AL 36330	Mailing Address P.O. BOX 311070 ENTERPRISE, AL 36330
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DO NOT WRITE IN THIS SPACE



01152007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0479672	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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8. Name and Address of Current Registered Agent

WATSON, FRANKLIN H P.A.
5365 E. COUNTY HIGHWAY 30A, SUITE 105
SEAGROVE BEACH, FL 32459

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

U00000593153
01/22/07-80020-009 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PUGH, JOHN D P.O. BOX 1386 SANTA ROSA BEACH, FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARR, WILLIAM H P.O. BOX 311070 ENTERPRISE, AL 36330
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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: *William H Carr* 1/15/07 334-347-0088
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Day Daytime Phone #