

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093696

FILED
May 21, 2007
Secretary of State

Entity Name: THE LOBLOLLY FUND, LLC

Current Principal Place of Business:

7407 SE HILL TERRACE
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

7407 SE HILL TERRACE
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORNETT, JANE L ESQ
401 E. OSCEOLA STREET
STUART, FL 34994 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: C () Delete
Name: FARLEY, MARY KAY
Address: 7407 SE HILL TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: SULLIVAN, JOHN
Address: 7407 S E HILL TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: JONES, JOHN
Address: 7407 S E HILL TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: KELLER, JOHN
Address: 7407 S E HILL TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: MYERS, BOB
Address: 7407 S E HILL TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: MCCREE, DON
Address: 7407 S E HILL TERRACE
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DON MCCREE

T

05/21/2007

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