

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012354

FILED
Apr 15, 2007
Secretary of State

Entity Name: MAKEVA ENTERPRISES, L.C.

Current Principal Place of Business:

1401 MARYLAND AVENUE
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

1401 MARYLAND AVENUE
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, THOMAS J ESQ
BROWN AND BROWN ATTORNEYS AT LAW, P.A.
1102 EAST TENNESSEE STREET
TALLAHASSEE, FL 323086912 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: MGR () Delete
Name: PHILLIPS, KENNETH W
Address: 1401 MARYLAND AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGR () Delete
Name: SEXTON-PHILLIPS, VALERIA
Address: 1504 WISCONSIN AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: MGR () Delete
Name: PHILLIPS, MICHAEL
Address: 1504 WISCONSIN AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES:

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

Title: () Change () Addition
Name:
Address:
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 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: KENNETH PHILLIPS

MGR

04/15/2007

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