

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000019946

FILED
Jan 09, 2007
Secretary of State

Entity Name: ALLEN PERKINS, LLC

Current Principal Place of Business:

2315 N. WELLESLEY DR.
BRADENTON, FL 34207

New Principal Place of Business:

726 65TH AVE EAST
BRADENTON, FL 34203

Current Mailing Address:

2315 N. WELLESLEY DR.
BRADENTON, FL 34207

New Mailing Address:

726 65TH AVE EAST
BRADENTON, FL 34203

FEI Number: 72-1613004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, ALLEN
2315 N. WELLESLEY DR.
BRADENTON, FL 34207 US

Name and Address of New Registered Agent:

PERKINS, ALLEN
726 65TH AVE EAST
BRADENTON, FL 34203 US

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:

01/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PERKINS, ALLEN
Address: 2315 N. WELLESLEY DR.
City-St-Zip: BRADENTON, FL 34207

Title: MGRM () Delete
Name: PORTER, TERRY
Address: 2315 N. WELLESLEY DR.
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PERKINS, ALLEN
Address: 726 65TH AVE EAST
City-St-Zip: BRADENTON, FL 34203

Title: MGRM (X) Change () Addition
Name: PERKINS, KATRINA N
Address: 726 65TH AVE EAST
City-St-Zip: BRADENTON, FL 34203

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: KATRINA PERKINS

MGRM

01/09/2007

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