2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000062875

City-St-Zip:

Entity Name: MAJESTIC OAKS APARTMENTS, LLC

FILED Apr 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 149 CONCOURSE STREET PEARL, MS 39208 **Current Mailing Address: New Mailing Address:** 149 CONCOURSE STREET PEARL, MS 39208 FEI Number: 20-5094419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BEGGS & LANE, A REGISTERED LIMITED LIABILI 501 COMMENDÉNCIA STREET PENSACOLA, FL 32502 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: ADDITIONS/CHANGES: () Delete Title: () Change (X) Addition GEORGE, PROVIAS MGRM Name: Name: Address: Address: 149 CONCOURSE DRIVE City-St-Zip: City-St-Zip: PEARL, MS 39208 Title: Title: MGRM () Change (X) Addition () Delete Name: Name: HERB, IVERSON MGRM Address: Address: PO BOX 12980 City-St-Zip: City-St-Zip: JACKSON, MS 39236 Title: () Delete Title: MGRM () Change (X) Addition RICK, FOUNTAIN MGRM Name: Name: Address: Address: 1771A LEILA DRIVE City-St-Zip: City-St-Zip: JACKSON, MS 39236 Title: () Delete Title: MGR () Change (X) Addition Name: Name: LARRY, ACCARDI Address: Address: 5567 LONGMONT DRIVE City-St-Zip: City-St-Zip: HOUSTON, TX 77056 Title: () Delete Title: MGR () Change (X) Addition RICHARD, SCHWARTZ Name: Name: PO BOX 3949 Address: Address:

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.

City-St-Zip:

JACKSON, MS 39205

SIGNATURE: GEORGE PROVIAS MGRM 04/19/2007