2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099037

Entity Name: ANNA'S VILLAGE, LLC

Name:

Address:

City-St-Zip:

HERNANDEZ, FRANK

GRAY, GA 31032

168 CLINTON CROSSING DRIVE

FILED Jan 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8401 NW 172ND STREET HIALEAH, FL 33015 **Current Mailing Address: New Mailing Address:** 8401 NW 172ND STREET HIALEAH, FL 33015 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERNANDEZ, RAUL 8401 NW 172ND STREET HIALEAH, FL 33015 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: MGRM Title: () Change () Addition () Delete FERNANDEZ, RAUL Name: Name: Address: 8401 NW 172ND STREET Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FERNANDEZ, DANIEL Name: Name: Address: 8401 NW 172ND STREET Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HORMAN, MARK Name: Name: 6761 NW LAKE JEFFREY ROAD Address: Address: City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RAUL FERNANDEZ MGRM 01/12/2007