2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# L06000108560

Entity Name: 19 & ALTERNATE 19 PROPERTIES LLC

Current Principal Place of Business:

PO BOX 845
BROOKSVILLE, FL 34605

New Principal Place of Business:

1533 US HIGHWAY 19
HOLIDAY, FL 34691

Current Mailing Address:

PO BOX 845
BROOKSVILLE, FL 34605

New Mailing Address:

FEI Number: 20-5761684 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAHMER, DAVID K DR.
26197 MOUNTAIN LAKE ROAD
BROOKSVILLE, FL 34602 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: MGRM ( ) Delete
Name: DAHMER, DAVID K
Address: 26197 MOUNTAIN LAKE ROAD
City-St-Zip: BROOKSVILLE, FL 34602

Title: MGRM ( ) Delete
Name: DAHMER, SANDRA M
Address: 26197 MOUNTAIN LAKE ROAD
City-St-Zip: BROOKSVILLE, FL 34602

ADDITIONS/CHANGES:

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 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: DR DAVID K DAHMER MGRM 04/27/2007

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