2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 21, 2007
Secretary of State

DOCUMENT# L06000070803

Entity Name: 130 KING LLC

Current Principal Place of Business:

130 KING STREET
ST. AUGUSTINE, FL 32085

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 654
ST. AUGUSTINE, FL 32085

New Mailing Address:

134 KING STREET
ST. AUGUSTINE, FL 32084

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WENDLER, DONNA R
130 KING STREET
ST. AUGUSTINE, FL 32085 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: WENDLER, DONNA R
Address: P.O. BOX 654
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: MGR ( ) Delete
Name: WENDLER, SCOTT G
Address: P.O. BOX 654
City-St-Zip: ST. AUGUSTINE, FL 32085

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: WENDLER, DONNA R
Address: 134 KING STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGR (X) Change ( ) Addition
Name: WENDLER, SCOTT G
Address: 134 KING STREET
City-St-Zip: ST. AUGUSTINE, FL 32084

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: DONNA WENDLER MGRM 05/21/2007

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