

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000001378 1. Entity Name CHRISTIE 1 LLC	
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Principal Place of Business 4239 63RD STREET WEST BRANDON, FL 34209	Mailing Address 4239 63RD STREET WEST BRANDON, FL 34209
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SCHERER, DAVID K 4239 63RD STREET WEST BRADENTON, FL 34209	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable

DATE _____

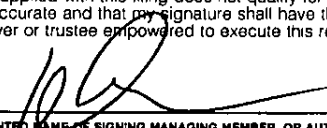
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHERER, DAVID K 4239 63RD ST W BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHERER, TERRI L 4239 63RD ST W BRADENTON, FL 34209
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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05/15/07-80148-003-50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **4-26-07** **941-795-6100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #