

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L00000005269			
1. Entity Name MALLET MANAGEMENT, L.L.C.			
Principal Place of Business 416 NORTH BAYLEN PENSACOLA, FL 32501	Mailing Address 416 NORTH BAYLEN PENSACOLA, FL 32501		
DO NOT WRITE IN THIS SPACE			
		03052007 No Chg-LLC CR2E083 (11/05)	
		4. FEI Number 59-3686975	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent MALLET, JAMES J 416 NORTH BAYLEN PENSACOLA, FL 32501		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$50.00 Due by May 1, 2007			
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE U00000743824 05/15/07-80125-001 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MALLET, JAMES J 416 NORTH BAYLEN PENSACOLA, FL 32501		
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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:  4/20/07		050 438 7244	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	