

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005584

FILED
Jul 16, 2007
Secretary of State

Entity Name: RAMSEY PROPERTIES, L.L.C.

Current Principal Place of Business:

367 PERIWINKLE WAY
SANIBEL ISLAND, FL 33957

New Principal Place of Business:

Current Mailing Address:

367 PERIWINKLE WAY
SANIBEL ISLAND, FL 33957

New Mailing Address:

FEI Number: 65-1017293 FEI Number Applied For () FEI Number Not Applicable () 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:

Name and Address of New Registered Agent:

RAMSEY, JOSEPH P
367 PERIWINKLE WAY
SANIBEL ISLAND, FL 33957 US

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: RAMSEY, ROBERT K
Address: 2304 WOODLEY AVENUE
City-St-Zip: LAKELAND, FL 33803

Title: MGRM () Delete
Name: RAMSEY, JOSEPH P
Address: 1137 SANDCASTLE WAY
City-St-Zip: SANIBEL, FL 33957

Title: MGRM () Delete
Name: TESCO-RAMSEY, DAWN M
Address: 1137 SANDCASTLE WAY
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH P. RAMSEY

MGRM

07/16/2007

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