

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006842

FILED
Apr 25, 2007
Secretary of State

Entity Name: SAMSON PROPERTIES, LLC.

Current Principal Place of Business:

19650 US HWY 441
MOUNT DORA, FL 32757

New Principal Place of Business:

6640 CAROTHERS PARKWAY
SUITE 500
FRANKLIN, TN 37067

Current Mailing Address:

19650 US HWY 441
MOUNT DORA, FL 32757

New Mailing Address:

6640 CAROTHERS PARKWAY
SUITE 500
FRANKLIN, TN 37067

FEI Number: 59-3653863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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: COHEN, ALAN
Address: 19650 US HWY 441
City-St-Zip: MOUNT DORA, FL 32757

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: JACOBS, JOEY A
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: AS () Change (X) Addition
Name: DAVIDSON, STEPHEN T
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: T () Change (X) Addition
Name: POLSON, JACK
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: VP () Change (X) Addition
Name: TURNER, BRENT
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

Title: SEC () Change (X) Addition
Name: HOWARD, CHRISTOPHER L
Address: 6640 CAROTHERS PARKWAY, SUITE 500
City-St-Zip: FRANKLIN, TN 37067

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: CHRISTOPHER L. HOWARD

SEC

04/25/2007

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