## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L00000011690**

1. Entity Name THE FLATS ON 30-A LLC



FILED Apr 27, 2007 08:00 AM Secretary of State

Principat Place of Business

2000 INTERSTATE PARK DR., STE. 400 MONTGOMERY, AL 36100

Mailing Address

2000 INTERSTATE PARK DR., STE. 400 MONTGOMERY, AL 36100



DO NOT WRITE IN THIS SPACE

01192007 No Chg-LLC CR2E083 (11/05)

4. FEI Number	<u> </u>	Applied For
63-1261901	Ţ	Not Applicable
5. Certificate of Status Desired		O Additional equired

6. Name and Address of Current Registered Agent

CORPORATE ACCESS, INC. 236 E. 6TH AVE. TALLAHASSEE, FL 32303

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of changions of registered agent.	ung its registered office or registered agent, or both	i, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and little d applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007		000000738750 05/11/07-80077-023 50.00
9. TITLE	MANAGING MEMBERS/MANAGERS MGRM		
NAME STREET ADDRESS CITY-ST-ZIP	COLONIAL REAL ESTATE INVESTMETNS, INC. 2000 INTERSTATE PARK DR. MONTGOMERY, AL 36109		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		in T	HIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE