


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000006249</b> 1. Entity Name DUNAWAY PROPERTIES, L.L.C.	
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Principal Place of Business 8550 SCENIC HWY., UNIT E PENSACOLA, FL 32514	Mailing Address 8550 SCENIC HWY., UNIT E PENSACOLA, FL 32514
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01052007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3725085	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  DUNAWAY, CHARLES 8550 SCENIC HWY., UNIT E PENSACOLA, FL 32514
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 <u><i>Charles Dunaway</i></u> DATE <u>1/12/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
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**Filing Fee is \$50.00  
Due by May 1, 2007**

000000593380  
01/22/07-80029-008 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUNAWAY, CHARLES B 8550 SCENIC HWY -UNIT E PENSACOLA, FL 32514
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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.

<b>SIGNATURE:</b> <u><i>Charles Dunaway</i></u> <u>owner/manager</u> <u>1/12/07</u> <u>850 851 4723</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>
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