# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Sep 12, 2007**
**Secretary of State**

DOCUMENT# L01000007625

**Entity Name:** CARTER BROTHERS, LLC

**Current Principal Place of Business:**

100 HARTSFIELD CENTER
STE 140
ATLANTA, GA 30354

**New Principal Place of Business:**

**Current Mailing Address:**

100 HARTSFIELD CENTER
STE 140
ATLANTA, GA 30354

**New Mailing Address:**

**FEI Number: 65-1104160** **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:**

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: | C | ( ) Delete |
| Name: | CARTER, CRIS D | |
| Address: | 100 HARTSFIELD CENTER PKWY STE 140 | |
| City-St-Zip: | ATLANTA, GA 30354 | |
| Title: | P | ( ) Delete |
| Name: | CARTER, JOHN F | |
| Address: | 100 HARTSFIELD CENTER PKWY STE 140 | |
| City-St-Zip: | ATLANTA, GA 30354 | |
| Title: | SVPS | ( ) Delete |
| Name: | COSTELLO, ROBERT C | |
| Address: | 100 HARTSFIELD CENTER PKWY STE 140 | |
| City-St-Zip: | ATLANTA, GA 30354 | |
| Title: | SVPT | ( ) Delete |
| Name: | FOLEY, MARK D | |
| Address: | 100 HARTSFIELD CENTER PKWY STE 140 | |
| City-St-Zip: | ATLANTA, GA 30354 | |
| Title: | VP | ( ) Delete |
| Name: | BOARD, STEVEN E | |
| Address: | 100 HARTSFIELD CENTER PKWY STE 140 | |
| City-St-Zip: | ATLANTA, GA 30354 | |
| Title: | VP | ( ) Delete |
| Name: | WILLIAMS, BRAD G | |
| Address: | 100 HARTSFIELD CENTER PKWY STE 140 | |
| City-St-Zip: | ATLANTA, GA 30354 | |

**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: | |
| 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: ROBERT C. COSTELLO VP 09/12/2007

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