

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021220

Entity Name: CHAIRES PROPERTIES,LLC

FILED
Apr 19, 2007
Secretary of State

Current Principal Place of Business:

4697 NORTH MONROE STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

5343 WATER VALLEY DRIVE
TALLAHASSEE, FL 32303

New Mailing Address:

4697 NORTH MONROE STREET
TALLAHASSEE, FL 32303

FEI Number: 01-0571560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESLEY, SHAWN L
4697 NORTH MONROE STREET
TALLAHASSEE, FL 32303 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: WESLEY, SHAWN L MGRM
Address: 5343 WATER VALLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: WESLEY, LEA K MGRM
Address: 5343 WATER VALLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

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 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: SHAWN L. WESLEY

MGRM

04/19/2007

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