

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000168

FILED  
Feb 19, 2007  
Secretary of State

Entity Name: WALDORFF PROPERTIES, LLC

**Current Principal Place of Business:**

25615 NORTH MAIN  
ALTHA, FL 32421

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 38  
ALTHA, FL 32421

**New Mailing Address:**

FEI Number: 90-0005393

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HINES, JAMES P  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606 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: MGR ( ) Delete  
Name: WALDORFF, JIMMY M SR.  
Address: 25615 NORTH MAIN STREET  
City-St-Zip: ALTHA, FL 32421

Title: MGR ( ) Delete  
Name: WALDORFF, BETTY R  
Address: 25615 NORTH MAIN STREET  
City-St-Zip: ALTHA, FL 32421

**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: JIMMY M WALDORFF SR

MGR

02/19/2007

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