

# **2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L02000006900

**FILED**  
**Dec 17, 2007**  
**Secretary of State**

**Entity Name:** INDY STREET, LLC

**Current Principal Place of Business:**

544 NORTH 9TH STREET  
DEFUNIAK SPRINGS, FL 32433

**New Principal Place of Business:**

**Current Mailing Address:**

544 NORTH 9TH STREET  
DEFUNIAK SPRINGS, FL 32433

**New Mailing Address:**

PO BOX 54  
DEFUNIAK SPRINGS, FL 32435

**FEI Number:** 20-4692344

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOCKERY, DEVAN  
544 NORTH 9TH STREET  
DEFUNIAK SPRINGS, FL 32433 US

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

WILLIAMSON, GLEN  
4 ENGLEBRECHT RD  
DEFUNIAK SPRINGS, FL 32433 US

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: GLEN WILLIAMSON

12/17/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DOCKERY, DEVAN  
Address: 1500 TEN LAKES DR  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM (X) Delete  
Name: REMOTE EXTENDER, INC. .  
Address: 544 NORTH 9TH ST  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WILLIAMSON, GLEN  
Address: 4 ENGLEBRECHT RD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: GLEN WILLIAMSON

MGRM

12/17/2007

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