

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012714

FILED
May 03, 2007
Secretary of State

Entity Name: BUFFALO INVESTMENTS, L.L.C.

Current Principal Place of Business:

17749 ASHLEY DRIVE
SUITE B
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

14691 FRONT BEACH ROAD
UNIT 8
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

17749 ASHLEY DRIVE
SUITE B
PANAMA CITY BEACH, FL 32413

New Mailing Address:

103 OXMOOR ROAD
BIRMINGHAM, AL 35209

FEI Number: 73-1677327 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:

POWELL, KENNETH A
17749 ASHLEY DRIVE
SUITE B
PANAMA CITY BEACH, FL 32413 US

Name and Address of New Registered Agent:

POWELL, KENNETH A
14691 FRONT BEACH ROAD
UNIT 8
PANAMA CITY BEACH, FL 32413 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:

05/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEE, JIMMY III
Address: 17749-B ASHLEY DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32413

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEE, JAMES C III
Address: 111 OXMOOR ROAD
City-St-Zip: BIRMINGHAM, AL 35209

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: JAMES C LEE III

MGR

05/03/2007

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