2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2007 08:00 A
Secretary of State

DOCUMENT # L02000020602

1. Entity Name
FLORIDA MITIGATION CREDIT INVESTORS LLC

Principal Place of Business	Mailing Address
C/O THE GOODMAN COMPANY 777 S. FLAGLER DRIVE, SUITE 1101-E WEST PALM BEACH, FL 33401	C/O THE GOODMAN COMPANY 777 S. FLAGLER DRIVE, SUITE 1101-E WEST PALM BEACH, FL 33401

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04252007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
NOT APPLICABLE

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SHEWALTER, WILLIAM A
C/O THE GOODMAN COMPANY
777 S. FLAGLER DRIVE, SUITE 1101-E
WEST PALM BEACH, FL 33401

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GOODMAN PROPERTIES, INC.
STREET ADDRESS	777 SOUTH FLAGLER DRIVE, SUITE 1101-E
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Goodman Properties Inc., manager

SIGNATURE: William A. Shewalter April 27, 2007 561-833-3777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

William A. Shewalter, Vice President