

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034212

FILED  
Aug 21, 2007  
Secretary of State

**Entity Name:** PRESERVE PARTNERS OF NORTH CAROLINA, LLC

**Current Principal Place of Business:**

2 WEST OAKLAND AVE STE 200  
OAKLAND, FL 34760

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1040  
OAKLAND, FL 34760

**New Mailing Address:**

**FEI Number:** 06-1669907      **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:**

ETCHISON, MICHAEL J  
2 WEST OAKLAND AVE STE 200  
OAKLAND, FL 34760 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: MARTIN, KENNETH R  
Address: 2 WEST OAKLAND AVE STE 100  
City-St-Zip: OAKLAND, FL 34760

Title: MGRM ( ) Delete  
Name: ETCHISON, MICHAEL J  
Address: 2 WEST OAKLAND AVE STE 200  
City-St-Zip: OAKLAND, FL 34760

Title: PTNR ( ) Delete  
Name: SAUNDERS, ROBERT  
Address: 2021 DOWNWOODS LN  
City-St-Zip: WINDERMERE, FL 34786

Title: PTNR (X) Delete  
Name: KIRVEN, ROGERS  
Address: 2710 REW CIRCLE STE 200  
City-St-Zip: OCOEE, FL 34761

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: MICHAEL J ETCHISON

MGRM

08/21/2007

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