2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2008
Secretary of State

DOCUMENT# L02000034487

Entity Name: WILLIAMS FAMILY PROPERTIES, LLC

Current Principal Place of Business:

603 CENTRAL FLORIDA PKWY #107
ORLANDO, FL 32824

New Principal Place of Business:

603 CENTRAL FLORIDA PKWY
SUITE #107
ORLANDO, FL 32824

Current Mailing Address:

P.O. BOX 593545
ORLANDO, FL 328593545

New Mailing Address:

P.O. BOX 593545
ORLANDO, FL 328593545 US

FEI Number: 55-0820149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, MARY H
603 CENTRAL FLORIDA PKWY #107
ORLANDO, FL 32824 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: WILLIAMS, MARY H
Address: 603 CENTRAL FLORIDA PKWY #107
City-St-Zip: ORLANDO, FL 32824

Title: MGR ( ) Delete
Name: WILLIAMS, A. VAUGHN
Address: 603 CENTRAL FLORIDA PKWY, #107
City-St-Zip: ORLANDO, FL 32824

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 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: MARY H. WILLIAMS MGR 01/24/2008

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