2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000000592

1. Entity Name
THE OKATIE COMPANY, LLC



FILED
May 02, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

517 EAST 9TH AVENUE TALLAHASSEE, FL 32303 517 EAST 9TH AVENUE TALLAHASSEE, FL 32303



05012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 54-2090316

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COOLER, JOHN B 517 EAST 9TH AVENUE TALLAHASSEE, FL 32303

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 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 Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature require		od Agont eignaturo roquirod when reinstoting)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			U00000756697 05/23/07-80041-001_50_00
9. TITLE	MANAGING MEMBERS/MANAGERS MGRM COOLER; JOHN Book role of the second control of the sec	- 455 a talke	
TITLE NAME STREET ADDRESS CITY-ST-7IP	MGRM MITCHELL, TODD 144 EMMETT WHALEY RD CRAWFORDVILLE, FL 32327		• 4.5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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.