## 2007 LIMITED LIABILITY COMPANY

## **ANNUAL REPORT**



FILED Apr 20, 2007 8:00 am Secretary of State

DOCUMENT # L0300004174  1. Entity Name POINTE SILOS 61, LLC						04-20-2007 9	90030 025	****50	0.00	
Principal Place of Business POST OFFICE DRAWER 229 TALLAHASSEE, FL 32303-0229  Mailing Address POST OFFICE DRAWER 22 TALLAHASSEE, FL 32303				9	1 38 8 (4 11 11 11 11 11 11 11 11 11 11 11 11 11		00857		1601 <del> </del>     1604	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04182007	Chg-LLC	CR2E083	3 (12/06)		
City & State		City & State			4. FEI Numb 59-376				pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate	of Status Desired		5.00 Add e Require		
	6. Name and Address of Current I	Registered Agent			7. Name and	Address of New R	egistered Ag	ent		
	e e			Name						
WAKEMAN, MARY L 1709 HERMITAGE BLVD SUITE 200				Street Addr	Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE, FL 32308										
				City	FL Zip Code					
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	ed office or reg	gistered agent, or bo	th, in the State of Flo	orida. I am far	niliar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registere	d Agent signature re	equired when reinstating)		DATE			
Filing Fee is \$50.00 Due by May 1, 2007										
							e check pay Departmen		e	
		RS/MANAGERS	10.				Departmen		e	
9. TITLE	MANAGING MEMBEI	RS/MANAGERS Delete	TITLE			Florida	Department CHANGES		e Addition	
9. TITLE NAME	MANAGING MEMBER MGRM MCCONNAUGHHAY, JAMES N	☐ Delete	TITLE	E		Florida	Department CHANGES	t of State		
9. TITLE NAME STREET ADDRESS	MANAGING MEMBEI MGRM MCCONNAUGHHAY, JAMES N 1709 HERMITAGE BLVD SUITE	☐ Delete	TITLE NAM STRE	E ET ADDRESS		Florida	Department CHANGES	t of State		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGRM MCCONNAUGHHAY, JAMES N 1709 HERMITAGE BLVD SUITE TALLAHASSEE, FL 32308	☐ Delete	TITLE NAM STRE CITY	E EET ADDRESS -ST-ZIP		Florida	CHANGES	Change	☐ Addition	
9. TITLE NAME STREET ADDRESS	MANAGING MEMBEI MGRM MCCONNAUGHHAY, JAMES N 1709 HERMITAGE BLVD SUITE	☐ Delete	TITLE NAM STRE	E EET ADDRESS -ST-ZIP		Florida	CHANGES	t of State		
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9. THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM MCCONNAUGHHAY, JAMES N 1709 HERMITAGE BLVD SUITE TALLAHASSEE, FL 32308 MGRM POPE, ROBERT D 1709 HERMITAGE BLVD SUITE TALLAHASSEE, FL 32308 MGRM	☐ Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY	E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E		Florida	CHANGES	Change	☐ Addition	
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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.

SIGNATURE: 4.1
SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4.19.07

850 .425.8112 Daytime Phone #