


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # L03000011917	
1. Entity Name LANGSTON ENTERPRISES, LLC	

Principal Place of Business 140 GUY STRICKLAND RD. CRAWFORDVILLE, FL 32327	Mailing Address 140 GUY STRICKLAND RD. CRAWFORDVILLE, FL 32327
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DO NOT WRITE IN THIS SPACE



01062007No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3587974	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SPRADLEY, CEDRIC
682 MILLWOOD DR.
HAVANA, FL 32333

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000723892
05/02/07-80093-013 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANGSTON, DONNA A 140 GUY STRICKLAND RD. CRAWFORDVILLE, FL 32327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANGSTON, DANIEL M 140 GUY STRICKLAND RD. CRAWFORDVILLE, FL 32327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANGSTON, JAMES T 140 GUY STRICKLAND RD CRAWFORDVILLE, FL 32327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: *Donna A. Langston* *Donna A. Langston* 04-10-07 (850) 926-8155
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #