2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031517

City-St-Zip:

PALM BAY, FL 32908

Entity Name: XCESS PROPERTIES, LLC

FILED Apr 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 597 FORT PIERCE ST.
 4480 WINDSOR CT

 PALM BAY, FL 32908
 MIMS, FL 32754

Current Mailing Address: New Mailing Address:

597 FORT PIERCE ST. 4480 WINDSOR CT PALM BAY, FL 32908 MIMS, FL 32754

FEI Number: 74-3109210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KLARENBEEK, CHARLES
597 FORT PIERCE ST.
PALM BAY, FL 32908 US

KLARENBEEK, CHARLES
4480 WINDSOR CT
MIMS, FL 32754 US

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.

City-St-Zip:

MIMS, FL 32754

SIGNATURE: 04/05/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: KLARENBEEK, CHARLES Name: KLARENBEEK, CHARLES

 Address:
 597 FORT PIERCE ST.
 Address:
 4480 WINDSOR CT

 City-St-Zip:
 PALM BAY, FL 32908
 City-St-Zip:
 MIMS, FL 32754

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: KLARENBEEK, ANN MARIA Name: KLARENBEEK, ANN MARIA Address: 597 FORT PIERCE ST. Address: 4480 WINDSOR CT

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNEMARIE KLARENBEEK MGRM 04/05/2007