2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047274

Entity Name: MAUREEN REYNOLDS. LLC

FILED Apr 28, 2008 Secretary of State

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

6738 BROWARD ST 4626 DELWOOD VIEW BLVD PANAMA CITY, FL 32408 PANAMA CITY, FL 32408

Current Mailing Address: New Mailing Address:

6738 BROWARD ST 4626 DELWOOD VIEW BLVD. PANAMA CITY, FL 32408 PANAMA CITY, FL 32408

FEI Number: 20-0418450 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:

REYNOLDS, MAUREEN
6738 BROWARD ST
4626 DELWOOD VIEW BLVD.
PANAMA CITY, FL 32408 US
PANAMA CITY, FL 32408 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.

SIGNATURE: 04/28/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition REYNOLDS, MAUREEN REYNOLDS, MAUREEN Name: Name: Address: 6738 BROWARD ST Address: 4626 DELWOOD VIEW BLVD. City-St-Zip: PANAMA CITY, FL 32408 City-St-Zip: PANAMA CITY, FL 32408

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: REYNOLDS, PATRICK Name: REYNOLDS, PATRICK Address: 6738 BROWARD ST Address: 4626 DELWOOD VIEW BLVD. City-St-Zip: PANAMA CITY, FL 32408 City-St-Zip: PANAMA CITY, FL 32408

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: MAUREEN REYNOLDS MGRM 04/28/2008