2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jan 18, 2007 08:00 AM Secretary of State DOCUMENT # L03000049617 1. Entity Name EATON REALTY, LLC Principal Place of Business Mailing Address 6139 KESTRELRIDGE DR. 6139 KESTRELRIDGE DR. LITHIA, FL 33547 LITHIA, FL 33547 CR2E083 (11/05) 01062007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number 20-0459202 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent EATON, CRAIG R DO NOT WRITE 6139 KESTRELRIDGE DR. LITHIA, FL 33547 IN THIS SPACE 8. The above named entity submits this statement for the propose of changing its registered office or registered agent, or both, in the state of Florida. It am familiar with, and accept the obligations of registered a SIGNATURE. Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME EATON, CRAIG R STREET ADDRESS 6139 KESTRELRIDGE DR. U000000\$91760 01/19/07-80029-016 50.00 CITY-ST-ZIP LITHIA, FL 33547 TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

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:

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

// 8/07 8/17-672.8022 Daytime Proce 8

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