

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000130

FILED  
May 07, 2007  
Secretary of State

Entity Name: ROBBINS PROPERTIES, LLC

**Current Principal Place of Business:**

169 N. JAN DRIVE  
PANAMA CITY, FL 32404 US

**New Principal Place of Business:**

**Current Mailing Address:**

169 N. JAN DRIVE  
PANAMA CITY, FL 32404 US

**New Mailing Address:**

FEI Number: 35-2225289      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ROBBINS, WANDA M  
5202 CHERRY ST.  
PANAMA CITY, FL 32404 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ROBBINS, WANDA M  
Address: 5202 CHERRY ST.  
City-St-Zip: PANAMA CITY, FL 32404 US

Title: MGRM ( ) Delete  
Name: ROBBINS, GREGORY B  
Address: 169 N. JAN DR.  
City-St-Zip: PANAMA CITY, FL 32404 US

Title: MGRM ( ) Delete  
Name: ROBBINS, ANTHONY S  
Address: 615 HICKORY KNOLL  
City-St-Zip: SUGAR HILL, GA 30518 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WANDA M. ROBBINS

MS.

05/07/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date