

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000002629

1. Entity Name  
PACE INDUSTRIAL PROPERTIES, LLC



Principal Place of Business  
2539 BAYOU BLVD.  
PENSACOLA, FL 32503

Mailing Address  
2539 BAYOU BLVD.  
PENSACOLA, FL 32503



01112007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FCI Number  
20-1018035

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DEMARIA, F. BRIAN  
2539 BAYOU BLVD.  
PENSACOLA, FL 32503

**DO NOT WRITE  
IN THIS SPACE**

3. 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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE \_\_\_\_\_

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

000000609366  
02/01/07-80046-024 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	QUALITY INVESTMENTS & BROKERAGE
STREET ADDRESS	21 E GARDEN ST STE 207
CITY - ST - ZIP	PENSACOLA, FL 32502

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
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: \_\_\_\_\_

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

Date

Day/Phone #

1/29/07 850 470 0961