2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jul 17, 2006 08:00 AM **Secretary of State DOCUMENT # L04000007018** MULLINS PROPERTY SERVICES, LLC Principal Place of Business Mailing Address 2977 TUNICA TRAIL 2977 TUNICA TRAIL MIDDLEBURG, FL 32068 MIDDLEBURG, FL 32068 07102006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FFi Number 20-0646331 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MULLINS, SHERYL LAFAY DO NOT WRITE 2977 TUNICA TRAIL MIDDLEBURG, FL 32068 IN THIS SPACE 8. 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 Agont signature required when registating) DATE Filing Fee is \$50.00 Due by September 6, 2006 000000570531 07/17/06-80005-012 50.00 MANAGING MEMBERS/MANAGERS 9. me MULLINS, SHERYL LAFAY NAME STREET ADDRESS 2977 TUNICA TRAIL CITY-ST-7P MIDDLEBURG, FL 32068 1ITLE MULLINS, GARY LEE NAME 2977 TUNICA TRAIL STREET ADDRESS CITY-ST-ZIP MIDDLEBURG, FL 32068 TITLE NAME STREET ADDRESS --- DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 60B, Florida Statutes.

L. Mulling

TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED