STREET ADDRESS CITY-ST-ZIP

P. Dept. Of State

## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

. Pl. Dept. Of State			FILED		
2007 LIMITED LIABILITY COMPANY ANNUAL REPORT				Apr 11, 2007 8:00 am Secretary of State	
DOCUMENT # L0400010210  1. Entity Name AUSTIN JOINT VENTURE, LLC  •				04-11-2007 90163 001 ***100.00 30004497	
Principal Place of Business Mailing Address  1211 NORTH WESTSHORE BLVD, STE 700 1211 NORTH WESTSHORE BLV TAMPA, FL 33607 TAMPA, FL 33607			/D, STE 700		
DO NOT WRITE IN THIS SPA			CE	03292007 No Chg-LLC CR2E083 (11/05)  4. FEt Number	
AUSTIN, ALFRED S 1211 N WESTSHORE BLVD, STE 700 TAMPA, FL 33607			DO NOT WRITE 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 little if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  Filling Fee is \$50.00					
Due by May 1, 2007					
NAME A STREET ADDRESS 1	MANAGING MEMBE MGR AUSTIN, ALFRED S 1211 NO. WESTSHORE BLVD., TAMPA, FL 33607				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE	

11. I hereby certify that the information supplied with this filling 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.

Ellett RONALD L. ELLETT SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE