2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000012470

1. Entity Name
DONNIE R. SOLES & ASSOCIATES, LLC

Principal Place of Business	Mailing Address
169 LORENZ DRIVE DEFUNIAK SPRINGS, FL 32435	169 LORENZ DRIVE DEFUNIAK SPRINGS, FL 32435

DO NOT WRITE IN THIS SPACE

02242007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
83-0385448	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SOLES, DONNIE R
169 LORENZ DRIVE
DEFUNIAK SPRINGS, FL 32435

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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 Agent signature required when reinstating)   DATE

Filing Fee Is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SOLES, DONNIE R
STREET ADDRESS	169 LORENZ DRIVE
CITY-ST-ZIP	DEFUNIAK SPRINGS, FL 32435

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05/17/07-80038-025 55.00

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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: *Donnie A Soles*   3-10-07   850 6953398

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #