2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000019487

1. Entity Name

APPALACHIAN RESOURCES OF FLORIDA, LLC



FILED Jan 25, 2007 08:00 AN Secretary of State

Principal Place of Business

2725 HANSON STREET FT. MYERS, FL 33901 Mailing Address

2725 HANSON STREET FT. MYERS, FL 33901



01162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0903398

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RANDOLPH, MICHAEL D ESQ. 1619 JACKSON STREET FORT MYERS, FL 33901

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan- ions of registered agent.	ging its registered office or registered agent, or bo	th, in the State of Ftorida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and tide 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 NAME STREET ADDRESS CITY-ST-ZIP	MGR RANDOLPH, STEVEN R 21720 EDWARDS DRIVE ALVA, FL 33920		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000603666 01/29/07-80021-022 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	DO	NOT WRITE
NAME STREET ADDRESS 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 filling does not qualify for the exemptions contained in Chapter 118, 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.			

Steven

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