

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 22, 2007  
Secretary of State**

DOCUMENT# L04000019680

Entity Name: FAYNE, LLC

**Current Principal Place of Business:**

**New Principal Place of Business:**

9341 SOUTHERN ORCHARD ROAD N.  
DAVIE,, FL 33328 US

**Current Mailing Address:**

**New Mailing Address:**

8930 W. STATE ROAD 84  
#308  
DAVIE, FL 33324 US

FEI Number: 20-0854692      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MOONEY, JOEL F  
9341 SOUTHERN ORCHARD ROAD N.  
DAVIE, FL 33328 US

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: MOONEY, JOEL F  
Address: 9341 SOUTHERN ORCHARD ROAD N.  
City-St-Zip: DAVIE, FL 33328 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOEL F. MOONEY

MGRM

07/22/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date