

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023690

FILED  
May 09, 2007  
Secretary of State

Entity Name: LISTER LLC

**Current Principal Place of Business:**

43 E. BROAD STREET  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

**Current Mailing Address:**

43 E. BROAD STREET  
TITUSVILLE, FL 32796

**New Mailing Address:**

FEI Number: 20-0922896      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:**

GARLAND, RHODA L  
405 INDIAN RIVER AVE  
1001  
TITUSVILLE, FL 32796 US

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

FREIDA, ATWOOD L  
43 E BROAD STREET  
TITUSVILLE, FL 32796 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: FREIDA ATWOOD

05/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ATWOOD, FREIDA G  
Address: 43 E. BROAD STREET  
City-St-Zip: TITUSVILLE, FL 32796

Title: MGRM ( ) Delete  
Name: LISTER, JUDY D  
Address: 43 E. BROAD STREET  
City-St-Zip: TITUSVILLE, FL 32796

**ADDITIONS/CHANGES:**

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

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: FREIDA ATWOOD

MS

05/09/2007

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