2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000027993

Entity Name: BURNS, HOHMAN, LLC

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2320 NORTH MONROE STREET 6320 GLASGOW DR. SUITE B TALLAHASSEE, FL 32312

TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

2320 NORTH MONROE STREET
SUITE B
TALLAHASSEE, FL 32303
6320 GLASGOW DR
TALLAHASSEE, FL 32312

FEI Number: 20-0985518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOHMAN, JOHN A

3047 KILLEARN POINT COURT
TALLAHASSEE, FL 32312 US

BURNS, WILLIAM B
6320 GLASGOW DR.
TALLAHASSEE, FL 32312 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: WILLIAM B BURNS 01/04/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 BURNS, WILLIAM B
 Name:

 Address:
 6320 GLASGOW DR
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 HOHMAN, JOHN A
 Name:

 Address:
 3047 KILLEARN POINT CT
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM B BURNS MGR 01/04/2007