2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT FILED DOCUMENT # L04000038732 1. Entity Name 1950 CONGRESS AVENUE, LLC 07 APR 27 AM 8: 06 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA **5858 CENTRAL AVENUE** 5858 CENTRAL AVENUE ST PETERSBURG, FL 33707 ST PETERSBURG, FL 33707 DO NOT WRITE IN THIS SPACE CR2E083 (11/05) 03022007 No Chg-LLC 4. FEI Number Applied For 20-1159798 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SHER, CRAIG H DO NOT WRITE C/O THE SEMBLER COMPANY **5858 CENTRAL AVENUE** IN THIS SPACE ST PETERSBURG, FL 33707 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 MANAGING MEMBERS/MANAGERS 9. **MGRM** TITLE NAME SEMBLER FAMILY PARTNERSHIP #35, LTD. **5858 CENTRAL AVENUE** STREET ADDRESS 2001.02200002 205/11/07-01009-003 **55.00 CITY-ST-ZIP ST PETERSBURG, FL 33707 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information symplied 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 receive or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

4/26/07 127-384-6000

CRAIGH, SHER

SIGNATURE: