,2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jan 23, 2007 08:00 AM Secretary of State DOCUMENT # L04000043129 1. Entity Name PINESTRAW PARTNERS, L.L.C. Principal Place of Business Mailing Address ONE DRENNEN ROAD ONE DRENNEN ROAD ORLANDO, FL 32806 ORLANDO, FL 32806 01162007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 83-0398255 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STUART, JEFFERY E DO NOT WRITE ONE DRENNEN ROAD ORLANDO, FL 32806 IN THIS SPACE 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. MGR TITLE STUART, JEFFERY E NAME STREET ADDRESS ONE DRENNEN ROAD CITY-ST-ZIP ORLANDO, FL 32806 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7P TITLE

11. I hereby certify that the information supplied 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

407-859-3436

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR RINGED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP

JEFFREY E. STUAR

1/19/07

FILED