2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L04000046040 ANCHOR REALTY & MORTGAGE COMPANY OF TALLAHASSEE, LLC Mailing Address Principal Place of Business 2734 CAPITAL CIRCLE NE PO BOX 250 APALACHICOLA, FL 32329 TALLAHASSEE, FL 32308 BK 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122007 Chg-LLC CR2E083 (12/06) Applied For City & State City & State 4. FEI Number Not Applicable 20-1260728 Zip Country \$5.00 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MONOD, OLIVIER Street Address (P.O. Box Number is Not Acceptable) **82 6TH STREET** APALACHICOLA, FL 32320 City Zip Code 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 Make check payable to Filing Fee is \$50.00 Due by May 1, 2007 Florida Department of State 9 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGRM MGRM TITLE Delete TITLE **™** Change Addition | ANCHOR REPORTY & MORT COMPOSST. GENEGE ANCHOR REALTY & MORT COMP OF ST GEORGE ISL NAME NAME STREET ADDRESS 82 GTH STREET 119 FRANKLIN BLVD STREET ADDRESS CITY-ST-ZIP ST. GEORGE ISLAND, FL. 32328 CITY-ST-ZIP APARAHICOLA, FL 32320 MGRM TITLE Oelete MILE ☐ Change ☐ Addition BKKORFANTY, CATHERINE E NAME NAME 15015 FRIENDSHIP LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32309 CITY-ST-7IP TITLE TITLE ☐ Change ■ Addition ☐ Delete NAME NAME 100098317681 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 04/24/07 - -0.1054 - -0.13TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

SIGNATURE:

ANCHOR REALTY & MORTERS COMPANY OF ST. GEORGE DISSAND. INC