2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000046444 1. Entity Name ROLAND MARTIN, LLC Principal Place of Business 3530 31ST AVENUE SW P.O. BOX 990370 NAPLES, FL 34117 NAPLES, FL 34116

FILED Feb 05, 2007 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

BIGHATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

01242007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

NOVATT, JEFF M ESQ. C/O CHEFFY, PASSIDOMO, ET AL 821 FIFTH AVENUE SOUTH, SUITE 201 NAPLES, FL 34102

SIGNATURE:

DO NOT WRITE 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, typod 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		U00000620698 02/09/07-80054-019 50.00
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR MARTIN, ROLAND P.O. BOX 990370 NAPLES, FL 34116	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		