

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000055589

FILED
Apr 30, 2007
Secretary of State

Entity Name: TANNAMARK INVESTMENTS, LLC

Current Principal Place of Business:

4859 FOXCREEK TRAIL
RENO, NV 89509 US

New Principal Place of Business:

4859 FOXCREEK TRAIL
RENO, NV 89519 US

Current Mailing Address:

4859 FOXCREEK TRAIL
RENO, NV 89509 US

New Mailing Address:

4859 FOXCREEK TRAIL
RENO, NV 89519 US

FEI Number: 77-0844409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JANET GENTRY CPA - PA
151 MARY ESTHER BLVD.,
405A
MARY ESTHER, FL 32569 US

Name and Address of New Registered Agent:

JANET GENTRY CPA - PA
151 MARY ESTHER BLVD.,
405A
FORT WALTON BEACH, FL 32569 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:

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAILEY, MARK D
Address: 4859 FOXCREEK TRAIL
City-St-Zip: RENO, NV 89509 US

Title: MGR () Delete
Name: BAILEY, TANNA J
Address: 4859 FOXCREEK TRAIL
City-St-Zip: RENO, NV 89509 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BAILEY, MARK D
Address: 4859 FOXCREEK TRAIL
City-St-Zip: RENO, NV 89519 US

Title: MGR (X) Change () Addition
Name: BAILEY, TANNA J
Address: 4859 FOXCREEK TRAIL
City-St-Zip: RENO, NV 89519 US

I hereby certify that the information supplied with this filing does not qualify 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: MARK D BAILEY

MGRM

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date