2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2006
Secretary of State

DOCUMENT# L04000059417

Entity Name: ADCOCK PROPERTIES, LLC

Current Principal Place of Business:

6503 SAYLERS CREEK COURT
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

6503 SAYLERS CREEK COURT
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 55-0880905 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ADCOCK, CHARLES E III
6503 SAYLERS CREEK COURT
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ADCOCK, CHARLES E III
Address: 6503 SAYLERS CREEK COURT
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGR ( ) Delete
Name: ADCOCK, CHARLES E JR
Address: 9681 PRITMORE ROAD EAST
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: ADCOCK, CHARLES E JR
Address: 428 HONEYCOMB WAY
City-St-Zip: JACKSONVILLE, FL 32257

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES E. ADCOCK, III MGRM 05/04/2006

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