2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000062078

1. Entity Name
COMPTON & DELANEY, LLC



Principal Place of Business

400 E COMPTON ST ORLANDO, FL 32806 Mailing Address

400 E COMPTON ST ORLANDO, FL 32806

FILED Apr 27, 2007 8:00 am Secretary of State

04-27-2007 90035 013 ***150.00

611142430



04232007 No Chg-LLC

CR2E083 (11/05)

3212178247

Daytime Phone #

4.24.07

4. FEI Number	 Applied For
20-1636925	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

DELOACH BRYANT, CARLA 1206 E RIDGEWOOD ST ORLANDO, FL 32803

SIGNATURE:

DO NOT WRITE IN THIS SPACE

		IN THIS SPACE
8. The above the obligat	named entity submits this statement for the purpose of changions of registered agent.	i ging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating) DATE
Fi	iling Fee is \$50.00 ue by May 1, 2007	(NOTE: nogstared Agent suprature response when he stating)
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELOACH, D 400 E COMPTON ST ORLANDO, FL 32806	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DELOACH, J. 400 E COMPTON ST ORLANDO, FL 32806	·
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
indicated	certify that the information supplied with this filing does not on this report is true and accurate and that my signature shibility company or the receiver or trustee empowered to execute the state of	qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information all have the same legal effect as if made under oath; that I am a managing member or manager of the cute this report as required by Chapter 608, Florida Statutes.

DAVID B. DELDACH

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