2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007
Secretary of State

DOCUMENT# L04000073169

Entity Name: FLORIDA OFFICE PRODUCTS, LLC

Current Principal Place of Business:

4235 WOODVILLE HWY.
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5989
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 20-1780620 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOVE, DOUGLAS
4235 WOODVILLE HWY.
TALLAHASSEE, FL 32305 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:	P	( ) Delete
Name:	GROVE, DOUGLAS	
Address:	4235 WOODVILLE HWY	
City-St-Zip:	TALLAHASSEE, FL 32305	

ADDITIONS/CHANGES:

Title:	P	(X) Change ( ) Addition
Name:	GOVE, DOUGLAS	
Address:	4235 WOODVILLE HWY	
City-St-Zip:	TALLAHASSEE, FL 32305	

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: DOUGLAS GOVE P 04/20/2007

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