

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073764

FILED
Jan 15, 2007
Secretary of State

Entity Name: ENHANCED PROPERTIES, LLC

Current Principal Place of Business:

P.O. BOX 56006
JACKSONVILLE, FL 32241 US

New Principal Place of Business:

509 CUNNINGHAM HOLLOW WAY
JACKSONVILLE, FL 32259 US

Current Mailing Address:

P.O. BOX 56006
JACKSONVILLE, FL 32241 US

New Mailing Address:

FEI Number: 20-1731198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARLOW, ROBERT K III
P.O. BOX 56006
JACKSONVILLE, FL 32241 US

Name and Address of New Registered Agent:

BARLOW, ROBERT K III
509 CUNNINGHAM HOLLOW WAY
JACKSONVILLE, FL 32259 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: _____ 01/15/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARLOW, ROBERT K III
Address: P.O. BOX 56006
City-St-Zip: JACKSONVILLE, FL 32241 US

Title: MGR () Delete
Name: BARLOW, RHONDA R
Address: P.O. BOX 56006
City-St-Zip: JACKSONVILLE, FL 32241 US

ADDITIONS/CHANGES:

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

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

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: ROBERT BARLOW MGR 01/15/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date