2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2007
Secretary of State

DOCUMENT# L04000074000

Entity Name: SPECAT, L.L.C.

Current Principal Place of Business:

775 GULF SHORE DR.
#4209
DESTIN, FL 32541

New Principal Place of Business:

775 GULF SHORE DR.
#4208
DESTIN, FL 32541

Current Mailing Address:

7819 LEYTE AVE
NORFOLK, VA 23511

New Mailing Address:

775 GULF SHORE DR.
#4208
DESTIN, FL 32541

FEI Number: 20-1744524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONCEPCION, CHERYL
815 TURNBERRY WAY
NICEVILLE, FL 32578 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:	GALLANT, ROBIN	
Address:	106 N. CHURCHHILL DR.	
City-St-Zip:	FAYETTEVILLE, NC 28303	
Title:	MGRM	( ) Delete
Name:	NELSON, MICHAEL G	
Address:	20 3RD INFANTRY RD	
City-St-Zip:	FT LEAVENWORTH, KS 66027	
Title:	MGR	( ) Delete
Name:	CONCEPCION, CHERYL	
Address:	815 TURNBERRY WAY	
City-St-Zip:	NICEVILLE, FL 32578	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: MICHAEL NELSON MGRM 02/05/2007

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