2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000079434

1. Entity Name
ORLANDO OUTFITTERS, LLC



FILED
Jan 17, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

2814 CORRINE DRIVE ORLANDO, FL 32803 2814 CORRINE DRIVE ORLANDO, FL 32803

US



DO NOT WRITE IN THIS SPACE

| 01032007 No Chg-LLC | CR2E083 (11/05) | | |
|----------------------------------|-----------------|-------------------|--|
| 4. FEI Number | | Applied For | |
| 20-1828502 | | Not Applicable | |
| 5. Certificate of Status Desired | | \$5.00 Additional | |

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

BETTIS, J T 2814 CORRINE ORLANDO, FL 32803

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| 8 | 3. The above named entity submits this statement for the purpose of changing its registered office or registered ager | nt, or both, in the State of Florida. | I am familiar with, and accept |
|---|---|---------------------------------------|--------------------------------|
| | the obligations of registered agent. | | |
| | | | |
| _ | NONEATH LITE | | |

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

| 9. | MANAGING MEMBERS/MANAGERS |
|----------------|---------------------------|
| TITLE | MGRM |
| NAME | BETTIS, J T |
| STREET ADDRESS | 2814 CORRINE DRIVE |
| CITY-ST-ZIP | ORLANDO, FL 32803 |
| TITLE | MGRM |
| NAME | BETTIS, TIMOTHY J |
| STREET ADDRESS | 2814 CORRINE DRIVE |
| CITY-ST-ZIP | ORLANDO, FL 32803 |
| TITLE | |
| NAME | • • • |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

1. 13,07

101.896.8260

Daytime Phone #