2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081475

Entity Name: SOUTH WALTON VENTURES IV, LLC

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3023 N. SHANNON LAKES DRIVE, SUITE 101 3019 N. SHANNON LAKES DRIVE TALLAHASSEE, FL 32309

STE 201

TALLAHASSEE, FL 32309

Current Mailing Address: New Mailing Address:

3023 N. SHANNON LAKES DRIVE, SUITE 101 3019 N SHANNON LAKES DRIVE TALLAHASSEE, FL 32309

STE 201

TALLAHASSEE, FL 32309

FEI Number: 20-2443332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WATERS, WILLIAM R JR OWENS, JOHN A 3019 N SHANNON LAKES DRIVE, STE 201 703 NORTH MONROE STREET TALLHASSEE, FL 32303 TALLHASSEE, FL 32309

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: JOHN A OWENS 04/25/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

OWENS, JOHN A Name: Name: OWENS, JOHN A

Address: 3023 N. SHANNON LAKES DRIVE, SUITE 101 Address: 3019 N. SHANNON LAKES DRIVE, SUITE 201

City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: JOHN A OWENS **MGRM** 04/25/2006