## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Feb 16, 2007 08:00 AM Secretary of State **DOCUMENT # L04000082785** 1. Entity Name **TUPELO LLC** Mailing Address Principal Place of Business 116 TUPELO AVENUE PO BOX 461 FT WALTON BEACH, FL 32549 FT. WALTON BEACH, FL 32548 02132007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1991383 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RABELL-BRIONES, FRANCISCO DO NOT WRITE 116 TUPELO AVENUE FT WALTON BEACH, FL 32548 in this space 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) 02/27/07-80029-025 50.00 Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS MGRM TITLE RABELL-BRIONES, FRANCISCO STREET ADDRESS 116 TUPELO AVENUE FT. WALTON BEACH, FL 32548 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

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 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.

KOALISIS RABFILL BRIDGES

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

2/13/07

850.585.4748