

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084219

FILED
Apr 04, 2007
Secretary of State

Entity Name: FERNANDEZ AND LANSANG, LLC

Current Principal Place of Business:

9623 SW 34 LANE
GAINESVILLE, FL 32608

New Principal Place of Business:

10928 SW 11TH LANE
GAINESVILLE, FL 32607

Current Mailing Address:

9623 SW 34 LANE
GAINESVILLE, FL 32608

New Mailing Address:

10928 SW 11TH LANE
GAINESVILLE, FL 32607

FEI Number: 11-3735692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, HUBERT
9623 SW 34 LANE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

FERNANDEZ, HUBERT
10928 SW 11TH LANE
GAINESVILLE, FL 32607 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:

04/04/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FERNANDEZ, HUBERT
Address: 9623 SW 34 LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM () Delete
Name: LANSANG, MARIA C
Address: 9623 SW 34 LANE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FERNANDEZ, HUBERT
Address: 10928 SW 11TH LANE
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM (X) Change () Addition
Name: LANSANG, MARIA C
Address: 10928 SW 11TH LANE
City-St-Zip: GAINESVILLE, FL 32607

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: MARIA CECILIA LANSANG

MGRM

04/04/2007

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