

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088334

FILED
Jan 31, 2007
Secretary of State

Entity Name: COOPER & MADISON PROPERTIES, L.L.C.

Current Principal Place of Business:

281 HILLCREST DRIVE
OVIEDO, FL 32765 US

New Principal Place of Business:

2508 87TH AVE NE
EVERETT, WA 98205 US

Current Mailing Address:

281 HILLCREST DRIVE
OVIEDO, FL 32765 US

New Mailing Address:

2508 87TH AVE NE
EVERETT, WA 98205 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEFKOWITZ, IVAN M
430 N MILLS AVE
ORLANDO, FL 32803 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: MGR () Delete
Name: ANDREWS, CYNTHIA
Address: 281 HILLCREST DRIVE
City-St-Zip: OVIEDO, FL 32765 US

Title: MGR () Delete
Name: ANDREWS, CHARLES O III
Address: 281 HILLCREST DRIVE
City-St-Zip: OVIEDO, FL 32765 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ANDREWS, CYNTHIA
Address: 2508 87TH AVE NE
City-St-Zip: EVERETT, WA 98205 US

Title: MGR (X) Change () Addition
Name: ANDREWS, CHARLES O III
Address: 2508 87TH AVE NE
City-St-Zip: EVERETT, WA 98205 US

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: CYNTHIA ANDREWS MGR 01/31/2007

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