2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000007360

Entity Name: THE SOUNDINGS PARTNERS, LLC

FILED Apr 27, 2009 Secretary of State

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

1560 PEACHTREE RD 20 AVENUE D APALACHICOLA, FL 32320 SUITE 202

APALACHICOLA, FL 32320

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 33 APALACHICOLA, FL 32329

FEI Number: 20-2223284 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:

GALLOWAY, CHARLES H
1560 PEACHTREE RD
20 AVENUE D
APALACHICOLA, FL 32320 US
SUITE 202

APALACHICOLA, FL 32320 03 00112 202 APALACHICOLA, FL 32320 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: 04/27/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 BOLTON, NEAL
 Name:

 Address:
 440 COCHRAN DRIVE
 Address:

 City-St-Zip:
 ATLANTA, GA 30327
 City-St-Zip:

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

 Name:
 GALLOWAY, CHARLES H
 Name:
 GALLOWAY, CHARLES H

 Address:
 1560 PEACHTREE RD
 Address:
 20 AVENUE D, SUITE 202

 City-St-Zip:
 APALACHICOLA, FL 32320
 City-St-Zip:
 APALACHICOLA, FL 32320

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES H. GALLOWAY MR. 04/27/2009