2007 LIMITED LIAB LITY COMPANY ANNUAL REPORT

FILED Apr 25, 2007 08:00 All Secretary of State

ANNUAL REPORT				, trbi	23, 2007 00.
DOCUI 1. Entity Nam FIFTY MI		157		S	Secretary of St
	e of Business ENINSULA DRIVE EACH, FL 32118 US	Mailing Address 42 SOUTH PENINSULA DRIVE DAYTONA BEACH, FL 32118	US	 	ESIN SENE UKU KAN KAN KAN KAN KAN
		Proceedings of the		04232007 No Chg-LLC	CR2E083 (11/05)
į , D	O NOT WRITE	IN THIS SPA	CE	4. FEI Number	Applied For
				20-2261800 5. Certificate of Status Desired	Not Applicable \$5.00 Additional Fee Required
	6. Name and Address of Current R	egistered Agent		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 1 1 2 2 2 2 2 2 2 3 S
BOLERJACK, DANIEL J 42 SOUTH PENINSULA DRIVE				DO NOT WE	
DAYTONA	A BEACH, FL 32118			IN THIS SPA	ACE
	named entity submits this statement for t	the purpose of changing its register	ed office or register	ed agent, or both, in the State of Flori-	da I am familiar with, and accept
SIGNATURE_	-	d title if applicable. (NOTE: Registere	nd Agent signature required	when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007				U000001	729352 30037-014 50.00
9.	MANAGING MEMBER	S/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOLERJACK, DANIEL J 42 SOUTH PENINSULA DRIVE DAYTONA BEACH, FL 32118				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS				DO NOT W	
CITY-ST-ZIP TITLE				DO NOT WI	
NAME STREET ADDRESS				IN THIS SE	ACE
CITY-ST-ZIP TITLE					
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME					The state of the s
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 1 further certify that the information indicated on this report is trad 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 of the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes

SIGNATURE:

CITY-ST-ZIP

URE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

75-0+ 905-30