2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Apr 27, 2007 8:00 am Secretary of State DOCUMENT # L05000012249 04-11-2007 90164 001 ***100.00 Entity Name HOUSTON PROPERTY INVESTMENTS, LLC Mailing Address Principal Place of Business 876 MANDE COURT SHALIMAR FL 32579 **876 MANDE COURT** SHALIMAR FL 32579 I LEGINAN DIA REGGI DERA DERIN DERIN DERIN DEREN FILID ITERA KORA DILAK SAHERE RAKSASA 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/06) City & State 4. FEI Number Applied For City & State 20-2377026 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOUSTON, HENRY J Stroot Address (P.O. Box Number is Not Acceptable) 879 MANDE COURT SHALIMAR FL 32579 Zip Code City 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 Signature, typed or private mane of registured agents ment total 1 applicable (NOTE Resistance Agent signalists requires when sustaining) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. MGRM 1111 ☐ Delete MID Change Addition NAMI MAM HOUSTON, HENRY J STREET ADDRESS SINI ET ADDRESS 879 MANDE COURT CHY SI 71P SHALIMAR FL 32579 CHY SI-ZIP Delete ☐ Change Addition 11011 MGRM HOUSTON, LAURA C NAM STRUCTADORESS STRUCT ADDRESS 879 MANDE COURT CITY ST-74P CHY-SI-ZIP SHALIMAR FL 32579 1111 ☐ Detero 1101 ☐ Change Addition NAME ::::: STITLE LANDRESS STELL! ADDRESS CHY-ST ZIP CHY SI-ZIP THEE Delete DILL ☐ Change ■ Addition N/M NAME STRUTT ADDRESS STRUET ADDRESS CHY St ZIP CITY SI-ZIP Delete ☐ Channe tiiii ☐ Addition BIONAMO STREET ADDRESS STREET ADDRESS CDY St ZP CHY-SI-ZIP ☐ Deleie 11111 ☐ Change ☐ Addition RHI NAMI NAMI STREET ADDRESS STRUCT ADDRESS CITY-SI-7P 11. I horeby cartily that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutos. 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 each, 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 Statutos.

COING MENBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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