

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020903

FILED
Apr 11, 2007
Secretary of State

Entity Name: POOLE MCELROY SYNDICATE, LLC

Current Principal Place of Business:

2145 DELTA BLVD SUITE 100
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2145 DELTA BLVD SUITE 100
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 76-0781967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, KIM L
2145 DELTA BLVD SUITE 100
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

POOLE ENGINEERING & SURVEYING, INC
2145 DELTA BLVD SUITE 100
TALLAHASSEE, FL 32303 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: KIM L. POOLE

04/11/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POOLE, KIM L
Address: 7706 CORNUCOPIA LN
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM (X) Delete
Name: MCELROY, LEIGH A
Address: 4080 MCLAUGHLIN DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM (X) Delete
Name: MCELROY, STEVEN
Address: 4080 MCLAUGHLIN DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM (X) Delete
Name: POOLE, BARRY W
Address: 7706 CORNUCOPIA LN
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES:

Title: MGM (X) Change () Addition
Name: POOLE ENGINEERING & SURVEYING
Address: 2145 DELTA BLVD SUITE 100
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KIM L. POOLE

PRES

04/11/2007

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