

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023630

Entity Name: S.D. COX-ROTH LLC

FILED  
Sep 04, 2007  
Secretary of State

## Current Principal Place of Business:

1831 N.W. 13TH STREET, #6  
GAINESVILLE, FL 32909

## New Principal Place of Business:

1831 N.W. 13TH STREET, #6  
GAINESVILLE, FL 32609

## Current Mailing Address:

1831 N.W. 13TH STREET, #6  
GAINESVILLE, FL 32909

## New Mailing Address:

1831 N.W. 13TH STREET, #6  
GAINESVILLE, FL 32609

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

COX, S. DAVID  
1831 N.W. 13TH STREET, #6  
GAINESVILLE, FL 32909 US

## Name and Address of New Registered Agent:

COX, S. DAVID  
1831 N.W. 13TH STREET, #6  
GAINESVILLE, FL 32609 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:

09/04/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: PST ( ) Delete  
Name: COX, S. DAVID  
Address: 1831 N.W. 13TH STREET, #6  
City-St-Zip: GAINESVILLE, FL 32909

Title: VP ( ) Delete  
Name: COX, PATSY D  
Address: 1831 NW 36TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

## ADDITIONS/CHANGES:

Title: PST (X) Change ( ) Addition  
Name: COX, S. DAVID  
Address: 1831 N.W. 13TH STREET, #6  
City-St-Zip: GAINESVILLE, FL 32609

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

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: S. DAVID COX

PST

09/04/2007

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