


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000025770</b> 1. Entity Name <b>HAVE FUN PROPERTIES, LLC</b>	
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Principal Place of Business <b>2810 OLD BAYSHORE WAY TAMPA, FL 33611</b>	Mailing Address <b>2810 OLD BAYSHORE WAY TAMPA, FL 33611</b>
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**DO NOT WRITE IN THIS SPACE**



01042007No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>20-2597853</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>SAAVEDRA, HENRY G 2810 OLD BAYSHORE WAY TAMPA, FL 33611</b>
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM MCKENNA, STEVE 618 BODPHORUS TAMPA, FL 33602</b>
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01/09/07-80027-008 50.00

**DO NOT WRITE  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. 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 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.

<b>SIGNATURE:</b>  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	<b>1/5/07</b> Date	<b>(813) 350-6516</b> Daytime Phone #
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