

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028241

FILED  
Apr 04, 2007  
Secretary of State

Entity Name: POYDRAS, LLC

**Current Principal Place of Business:**

501 COMMENDENCIA STREET  
PENSACOLA, FL 32502

**New Principal Place of Business:**

**Current Mailing Address:**

501 COMMENDENCIA STREET  
PENSACOLA, FL 32502

**New Mailing Address:**

FEI Number: 20-2851454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEGGS & LANE A REGISTERED LIMITED LIABILIT  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32502 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: POYDRAS MGMT COM.,  
Address: TEN PORTFOLIO DR  
City-St-Zip: GULF BREEZE, FL 32561

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BRANNEN, DAVID A  
Address: 40 S. PALAFOX PLACE, SUITE 500  
City-St-Zip: PENSACOLA, FL 32502

Title: MGR ( ) Change (X) Addition  
Name: MOWE, CLIFF  
Address: 40 S. PALAFOX PLACE, SUITE 500  
City-St-Zip: PENSACOLA, FL 32502

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: DAVID A. BRANNEN

MGR

04/04/2007

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