

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030496

Entity Name: O7 LLC

FILED
Mar 03, 2006
Secretary of State

Current Principal Place of Business:

1025 SOUTH SEMORAN BLVD
1093
WINTER PARK, FL 32792 US

New Principal Place of Business:

PO BOX 2369
ORLANDO, FL 32802 US

Current Mailing Address:

1025 SOUTH SEMORAN BLVD
1093
WINTER PARK, FL 32792 US

New Mailing Address:

PO BOX 2369
ORLANDO, FL 32802 US

FEI Number: 20-2573377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIDLER, DARREN B
1025 SOUTH SEMORAN BLVD
1093
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

FIDLER, DARREN B
14545 BLUEBIRD PARK ROAD
WINDERMERE, FL 34786 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: DARREN FIDLER

03/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FIDLER, DARREN B
Address: 1025 SOUTH SEMORAN BLVD. STE 1093
City-St-Zip: WINTER PARK, FL 32792 US

Title: MGRM () Delete
Name: DAVIDOWITZ, ROBERT A
Address: 322 EAST CENTRAL BLVD. STE 1015
City-St-Zip: ORLANDO, FL 32801 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FIDLER, DARREN B
Address: PO BOX 2369
City-St-Zip: ORLANDO, FL 32802 US

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: DARREN FIDLER

MGRM

03/03/2006

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