


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90341 014 ****50.00

| | |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|
| DOCUMENT # L05000043021 |  |
| 1. Entity Name LEMON AVENUE PROPERTIES, LLC | |

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|--------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Principal Place of Business 47 S. PALM AVENUE SARASOTA, FL 34236 | Mailing Address 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236 |
|--------------------------------------------------------------------------------|--------------------------------------------------------------------------|

| | |
|------------------------------------------------|-------------------------------------------|
| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address P.O. Box 667 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State Bryan OH |
| Zip | Country USA |



04182007 Chg-LLC CR2E083 (12/06)

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|--------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------|
| 4. FEI Number NOT APPLICABLE | | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | | |
| 6. Name and Address of Current Registered Agent SEIDER, WILLIAM M 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |

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**

**Make check payable to
Florida Department of State**

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR ISAAC GROUP HOLDINGS, LLC, A DE LLC 47 S. PALM AVENUE SARASOTA, FL 34236 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

[Signature]

4-19-07

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