## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2007 08:00 Al
Secretary of State

1. Entity Nam	MENT # L05000048 PERTIES LLC	283			Secretary of Sta	
Principal Plac	e of Business	Mailing Address	* I		·	
2726 ANNET Flagler be	ITE ST. ACH, FL 32136	PO BOX 2537 Flagler Beach, FL 32136				
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	A NOT MOTE	IN THE COA	or_	02282007 No Chg-LLC	CR2E083 (11/05)	
L	OO NOT WRITE	: IN IMIS SPA	CE	FEI Number     NOT APPLICABLE	Applied For Not Applicable	
				5. Certificate of Status Desired	55.00 Additional Fee Required	
	6. Name and Address of Current	Registered Agent			· · · · · · · · · · · · · · · · · · ·	
KORBACH, KEVIN 2726 ANNETTE ST. FLAGLER BEACH, FL 32136			DO NOT WRITE IN THIS SPACE			
8. The above the obligation SIGNATURE.	named entity submits this statement for tions of registered agent.		red office or register		rida. I am familiar with, and accept	
F	iling Fee is \$50.00 ue by May 1, 2007		A	וטעוש	J655228 -80098-008 <b>5</b> 0,00	
9.	MANAGING MEMBE	RS/MANAGERS	<u> </u>		1,13	
TITLE	MGRM					
NAME STREET ADDRESS	KORBACH, KEVIN PO BOX 2537					
CITY-ST-ZIP	FLAGLER BEACH, FL 32136					
TITLE			1			
MAME						
STREET ADDRESS CITY-ST-ZIP						
INLE		<u> </u>	1			
NAME			J			
STREET ADDRESS CITY+ST-ZIP	-			DO NOT W	RITE	
TITLE	<del> </del>		-1			
NAME	**************************************			IN THIS SP	AUE	

11. I hereby certify that the information supplied with this filling 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.

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

2/28/07

Daytime Phone #