2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 06, 2007
Secretary of State

DOCUMENT# L05000050757

Entity Name: PITTS FAMILY PROPERTIES LLC

Current Principal Place of Business:

4412 DE LEN DRIVE
PANAMA CITY, FL 32404 US

New Principal Place of Business:

Current Mailing Address:

4412 DE LEN DRIVE
PANAMA CITY, FL 32404 US

New Mailing Address:

FEI Number: 20-2877004 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PITTS, JOEL S
4412 DE LEN DRIVE
PANAMA CITY, FL 32404 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:	PITTS, WILLIAM B	
Address:	4034 HOBBS LANE	
City-St-Zip:	PANAMA CITY, FL 32409 US	
Title:	MGR	( ) Delete
Name:	PITTS, JOEL S	
Address:	4412 DE LEN DRIVE	
City-St-Zip:	PANAMA CITY, FL 32404 US	
Title:	MGR	( ) Delete
Name:	PITTS, WILLIAM M	
Address:	7928 OAK VIEW DRIVE	
City-St-Zip:	PANAMA CITY, FL 32404 US	
Title:	MGR	( ) Delete
Name:	PITTS, RUSSELL S	
Address:	1202 MASSACHUSETTS AVENUE	
City-St-Zip:	LYNN HAVEN, FL 32444 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: JOEL S. PITTS MGR 08/06/2007

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