

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051146

FILED
Mar 30, 2007
Secretary of State

Entity Name: RAULERSON & RAULERSON, LLC

Current Principal Place of Business:

205 SW PARK STREET
OKEECHOBEE, FL 34974

New Principal Place of Business:

401 SW PARK STREET
OKEECHOBEE, FL 34974

Current Mailing Address:

12900 NW 144TH TRAIL
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 20-2974414 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAULERSON, KELLY
12900 NW 144TH TRAIL
OKEECHOBEE, FL 34972 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: RAULERSON, KELLY
Address: 12900 NW 144TH TRAIL
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGRM () Delete
Name: RAULERSON, DAVID
Address: 12900 NW 144TH TRAIL
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAULERSON, KELLY
Address: 12900 NW 144TH TRAIL
City-St-Zip: OKEECHOBEE, FL 34972

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: KELLEY RAULERSON

MGRM

03/30/2007

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