2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

Apr 20, 2007 08:00 AM **Secretary of State DOCUMENT # L05000059407** 1. Entity Name ROANOKE PROPERTIES, L.L.C. Principal Place of Business Mailing Address 1245 COURT STREET STE 102 PO BOX 123 CLEARWATER, FL 33756 OZONA, FL 34660 04162007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3006957 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BATES, LONDON L ESQ DO NOT WRITE 1245 COURT STREET STE 102 CLEARWATER, FL 33756 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) U00000719450 Filing Fee is \$50.00 Due by May 1, 2007 05/01/07-80064-011 50.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE BATES, LONDON L NAME **PO BOX 123** STREET ADDRESS CITY-ST-ZIP OZONA, FL 34660 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 poster empowered to execute this report as required by Chapter 608, Florida Statutes.

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED

Daytime Phone #