2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000065100

1. Entity Name 301/466, LLC



FILED Jan 09, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

1111 NE 25TH AVENUE SUITE 102 OCALA, FL 34470 1111 NE 25TH AVENUE SUITE 102 OCALA, FL 34470



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3124353

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOODING, W. JAMES III ESQ 1531 SE 36TH AVENUE OCALA, FL 34471

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	The above named entity submits this statement for the purpose of c the obligations of registered agent.	changing its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SI	SNATURE		
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

Filing Fee is \$50.00 Due by May 1, 2007

TITLE	MGR	
NAME	PREK, ALBERT B	
STREET ADDRESS	1111 NE 35 AVE., #102	
CITY-ST-ZIP	OCALA, FL 34470	
TITLE	P	
NAME	BOONE, KIRK	
STREET ADDRESS	1111 NE 25 AVE., #102	
CITY-ST-ZIP	OCALA, FL 34470	
TITLE		
NAME		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not quality for the e		

MANAGING MEMBERS/MANAGERS

U00000580451 01/10/07-80049-003 50.00

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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 earne 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 his seport as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Jan 4, 2007 (352) 7325255