


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2007 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L05000067371 |  |
| 1. Entity Name GEORGETOWN I, L.L.C. | |

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|---|---|
| Principal Place of Business 897 MERCERS FERNERY ROAD DELAND, FL 32720 | Mailing Address 897 MERCERS FERNERY ROAD DELAND, FL 32720 |
|---|---|



01152007No Chg-LLC CR2E083 (11/05)

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| 4. FEI Number 34-2051626 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent MURPHY, JOSEPH H 897 MERCERS FERNERY ROAD DELAND, FL 32720 | |
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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.

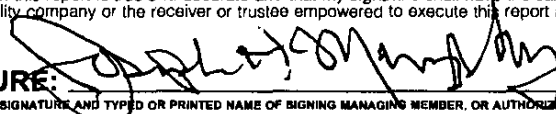
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing)
Signature, typed or printed name of registered agent and title if applicable DATE

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

| 9. MANAGING MEMBERS/MANAGERS | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM MURPHY, JOSEPH H 897 MERCERS FERNERY ROAD DELAND, FL 32720 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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01/22/07-80020-018 50.00

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

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #