2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 10, 2007
Secretary of State

DOCUMENT# L05000069303

Entity Name: GERONIMO PROPERTY GROUP, LLC

Current Principal Place of Business:

281 MULBERRY STREET
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

281 MULBERRY STREET
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

LEAGUE & JESPERSON, PA
3955 RIVERSIDE AVENUE
JACKSONVILLE, FL 32205 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: MGRM ( ) Delete
Name: MCVAY, MATT
Address: 13988 CRESTWICK DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM ( ) Delete
Name: CARTER, DOUG
Address: 13988 CRESTWICK DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MCVAY, MATT
Address: 281 MULBERRY STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: MGRM (X) Change ( ) Addition
Name: CARTER, DOUG
Address: 1245 HUBBARD STREET
City-St-Zip: JACKSONVILLE, FL 32206

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: MATTHEW MCVAY MGRM 07/10/2007

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