

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074563

Entity Name: FANNIN REAL ESTATE, LLC

FILED
Feb 26, 2007
Secretary of State

Current Principal Place of Business:

4384 CHAIRES CROSS ROAD
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

4384 CHAIRES CROSS ROAD
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 20-3272120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FANNIN, MARY F
4384 CHAIRES CROSS ROAD
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

FANNIN, MARY F
4384 CHAIRES CROSS ROAD
TALLAHASSEE, FL 32317 US

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: MARY F FANNIN

02/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FANNIN, STEPHEN K
Address: 4384 CHAIRES CROSS ROAD
City-St-Zip: TALLAHASSEE, FL 32311

Title: MGRM () Delete
Name: FANNIN, MARY F
Address: 4384 CHAIRES CROSS ROAD
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FANNIN, STEPHEN K
Address: 4384 CHAIRES CROSS ROAD
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGRM (X) Change () Addition
Name: FANNIN, MARY F
Address: 4384 CHAIRES CROSS ROAD
City-St-Zip: TALLAHASSEE, FL 32317

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: MARY F FANNIN

MGRM

02/26/2007

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