


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000077877 1. Entity Name A-TRACK PARTNERS, L.L.C.	
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Principal Place of Business 802 VALPARAISO BLVD. NICEVILLE, FL 32578	Mailing Address 802 VALPARAISO BLVD. NICEVILLE, FL 32578
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DO NOT WRITE IN THIS SPACE



01092007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3288882	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BARTH, JAMES C
30 SOUTH SHORE DRIVE
DESTIN, FL 32550

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARSENAULT, KEITH 802 VALPARAISO BLVD. NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THOMAS, CAROL 128 NORTH ANCHORS LAKE DRIVE SANTA ROSA BEACH, FL 32459
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01/25/07-80114-012 50.00

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IN THIS SPACE**

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 #