

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079052

FILED
May 09, 2007
Secretary of State

Entity Name: A NEW BEGINNING PROPERTY SOLUTIONS, LLC

Current Principal Place of Business:

1529 FAIRCLOTH CT.
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

1529 FAIRCLOTH CT.
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 20-3457869 FEI Number Applied For () 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:

FLORIDA INCORPORATOR
2730 WHITE SANDS DRIVE
SUITE 3-A
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

FLORIDA INCORPORATOR
4225 BERKSHIRE DRIVE
SUITE 3-A
SARASOTA, FL 34241 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:

05/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLINE, LAWRENCE J
Address: 1107 E. SWANSON DR.
City-St-Zip: DELTONA, FL 32738 US

Title: MGRM () Delete
Name: CLINE, ROBIN R
Address: 1529 FAIRCLOTH CT.
City-St-Zip: APOPKA, FL 32703

Title: MGRM () Delete
Name: CLINE, SUN OK
Address: 1529 FAIRCLOTH CT.
City-St-Zip: APOPKA, FL 32703 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: CLINE, ROBIN R
Address: 1529 FAIRCLOTH CT.
City-St-Zip: APOPKA, FL 32703 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBIN R. CLINE

MGRM

05/09/2007

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