## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093491

Entity Name: FULL CIRCLE HOLDINGS LLC

LAUDERDALE BY THE SEA, FL 33062

City-St-Zip:

FILED May 02, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 23031 TUCKAHOE RD. ALVA, FL 33920 **Current Mailing Address: New Mailing Address:** 23031 TUCKAHOE RD. ALVA, FL 33920 FEI Number: 56-2533397 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: Name and Address of New Registered Agent: MELTON, ANGELA 1429 NE 33RD LANE CAPE CORAL, FL 33909 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MELTON, ANGELA Name: Name: 1429 NE 33RD LANE Address: Address: City-St-Zip: CAPE CORAL, FL 33909 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LITTLETON, KIMBERLY Name: Name: Address: 1429 NE 33RD LANE Address: City-St-Zip: CAPE CORAL, FL 33909 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BOATMAN, THERESA L Name: Name: 2121 S. OCEAN BLVD. #801 Address: Address: City-St-Zip: LAUDERDALE BY THE SEA, FL 33062 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: STEVENS ANDRYS, SANDRA Name: 23031 TUCKAHOE RD. Address: Address: City-St-Zip: ALVA, FL 33920 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ANDRYS, ROBERT Name: Name: 23031 TUCKAHOE RD. Address: Address: City-St-Zip: ALVA, FL 33920 City-St-Zip: Title: () Delete Title: () Change () Addition PANTEJO, BARBARA J Name: Name: Address: 2121 SOUTH OCEAN BLVD SUITE 801 Address:

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.

City-St-Zip:

SIGNATURE: ANGELA MELTON MGRM 05/02/2007