## 2007 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Feb 13, 2007 08:00 AM DOCUMENT # L05000093890 Secretary of State CHAMBERS TREES LLC Principal Place of Business Mailing Address P.O. BOX 51 5200 N.W. 191 PL ORANGE LAKE, FL 32681 ORANGE LAKE, FL 32681 01032007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0934308 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHAMBERS, RICHARD DO NOT WRITE 5200 N.W. 191 PL **ORANGE LAKE, FL 32681** IN THIS SPACE 8. The above named entity submits this statement for present for present for present for the process 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 poent. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 U00000634574 02/22/07-80017-005 50.00 MANAGING MEMBERS/MANAGERS 9. MGR TITLE CHAMBERS, RICHARD NAME STREET ADORESS P.O. BOX 51 CITY-ST-7IP ORANGE LAKE, FL 32681 TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP me IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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 resolver or trastee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-73P