2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106245

Entity Name: GALLOWAY FAMILY PROPERTIES, LLC

FILED Aug 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16870 NORTH POYNER ROAD 161 WHITE CLIFF BLVD POLK CITY, FL 33868 AUBURNDALE, FL 33823

Current Mailing Address: New Mailing Address:

PO BOX 837 POLK CITY, FL 33868

FEI Number: 20-3778613 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:

GALLOWAY, DON L
16870 NORTH POYNER ROAD
POLK CITY, FL 33868 US
GALLOWAY, DON L
161 WHITE CLIFF BLVD
AUBURNDALE, FL 33823 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: 08/16/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete Name: GALLOWAY, DON L

Address: GALLOWAY, DON L Address: 16870 NORTH POYNER ROAD

City-St-Zip: POLK CITY, FL 33868

City-St-Zip:

Title: MGRM () Delete
Name: GALLOWAY, JAMES A
Address: 16870 NORTH POYNER ROAD

Title: MGRM () Delete
Name: RUNYON, GWENDOLYN

POLK CITY, FL 33868

Address: 16870 NORTH POYNER ROAD
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: GALLOWAY, DON L
Address: 161 WHITE CLIFF BLVD
City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM (X) Change () Addition

Name: GALLOWAY, JAMES A Address: 161 WHITE CLIFF BLVD City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM (X) Change () Addition

Name: RUNYON, GWENDOLYN Address: 161 WHITE CLIFF BLVD City-St-Zip: AUBURNDALE, FL 33823

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: DON L. GALLOWAY MGRM 08/16/2007