

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108482

Entity Name: MULLINAX PROPERTIES, LLC

FILED
Feb 02, 2007
Secretary of State

Current Principal Place of Business:

19800 VETERANS BLVD.
UNIT # A 7
PORT CHARLOTTE, FL 33954 US

New Principal Place of Business:

Current Mailing Address:

19800 VETERANS BLVD.
UNIT # A 7
PORT CHARLOTTE, FL 33954 US

New Mailing Address:

FEI Number: 20-3765075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWE, MIKE D
11045 TAMiami TRAIL S
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

MULLINAX, TENNEY E
1811 S.W. 62 PLACE
MIAMI, FL 33155 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: TENNEY MULLINAX

02/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MULLINAX, SAMUEL W
Address: 6937 PITOMBA STREET
City-St-Zip: NORTH PORT, FL 34286 US

Title: MGRM () Delete
Name: MULLINAX, KAREN M
Address: 6937 PITOMBA STREET
City-St-Zip: NORTH PORT, FL 34286 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SAMUEL MULLINAX

MGRM

02/02/2007

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