2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000118884

C&C FALLER FAMILY LLC

Mailing Address

DO NOT WRITE IN THIS SPACE

Principal Place of Business 5307 RANDOLPH ROAD ROCKVILLE, MD 20852

5307 RANDOLPH ROAD ROCKVILLE, MD 20852

FILED Jan 17, 2007 08:00 AM Secretary of State



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-4002564 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

YOVANOVICH, RICHARD D ESQUIRE 4001 NORTH TAMIAMI TRAIL SUITE 300 NAPLES, FL 34103

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8. 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. I am familiar with, and a the obligations of registered agent.						ith, and accept
SIC	Signature, typed or printed name of re	gistered agent and title if applicable.	(NOTE: Registered Agen	t signature required when reinstating)	DATE	
	Filing Fee is \$50.00 Due by May 1, 2007			The second secon	000000588115 01/17/07-80058-022	55.100

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9	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FALLER, CHARLES S III 5307 RANDOLPH ROAD ROCKVILLE, MD 20852
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	

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11. 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

ler Charles S Faller III SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

301-231-6000 Daylime Phone #