

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000022

Entity Name: FELSING RANKIN, LLC

FILED
Jan 03, 2007
Secretary of State

Current Principal Place of Business:

630 N WYMORE RD
SUITE 330
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

630 N WYMORE RD
SUITE 330
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 20-4024769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELSING, MARLYN D
630 N WYMORE RD
SUITE 300
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

FELSING, MARLYN D
630 N WYMORE RD
SUITE 330
MAITLAND, FL 32751 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:

01/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RANKIN, JUDY A
Address: 630 N WYMORE RD SUITE 330
City-St-Zip: MAITLAND, FL 32751

Title: MGRM () Delete
Name: FELSING, MARLYN D
Address: 630 N WYMORE RD SUITE 330
City-St-Zip: MAITLAND, FL 32751

Title: MGRM () Delete
Name: FELSING, CAROL E
Address: 630 N WYMORE RD SUITE 330
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES:

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

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: MARLYN D. FELSING

MGRM

01/03/2007

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