

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000006715

FILED
Aug 17, 2007
Secretary of State

Entity Name: PRAISE PARTNERSHIP, LLC

Current Principal Place of Business:

777 ELDRIDGE STREET
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

777 ELDRIDGE STREET
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 20-4193606 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:

PRICE, STEPHEN H ESQUIRE
1411 EDGEWATER DRIVE
SUITE 200
ORLANDO, FL 32804 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCOACH, TIMOTHY
Address: 777 ELDRIDGE STREET
City-St-Zip: ORLANDO, FL 32803

Title: MGR () Delete
Name: MCCOACH, JOY
Address: 777 ELDRIDGE STREET
City-St-Zip: ORLANDO, FL 32803

Title: MGR () Delete
Name: FIELD, BRAD
Address: 853 OLD HARTFORD ROAD
City-St-Zip: COLCHESTER, CT 06415

Title: MGR () Delete
Name: FIELD, SARAH
Address: 853 OLD HARTFORD ROAD
City-St-Zip: COLCHESTER, CT 06415

Title: MGR () Delete
Name: HIGHHOUSE, RONALD
Address: ROUTE 164
City-St-Zip: CALLICOON, NY 12723

Title: MGR () Delete
Name: HIGHHOUSE, JUDITH
Address: ROUTE 164
City-St-Zip: CALLICOON, NY 12723

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:

Title: () Change () Addition
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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 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: TIMOTHY MCCOACH

MGR

08/17/2007

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