2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Feb 27, 2007 8:00 am Secretary of State **DOCUMENT # L06000010233** 02-27-2007 90079 010 ****50.00 WATSON MOFFITT, LLC Principal Place of Business Mailing Address 138 BUSHNELL PLAZA, #103 138 BUSHNELL PLAZA, #103 BUSHNELL FL 33513 BUSHNELL, FL 33513 2. Principal Place of Business - No P.O. Box # 3. Mailing Address PO Box 635 Suite, Apt. #, etc. 2590 W C-48 Sulte, Apt. #, etc. 02212007 CR2E083 (12/06) Chg-LLC City & State City & State Applied For 4. FEI Number Not Applicable 20-4216982 Bushnell Bushnell, Zip 33<u>513</u> Country Country \$5.00 Additional 5. Certificate of Status Desired USA 33513 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LACKAY, CHRISTINA L Street Address (P.O. Box Number is Not Acceptable) 2590 W C-48 138 BUSHNELL PLAZA, #103 BUSHNELL, FL 33513 Zip Code City Bushnell 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 accept SIGNATURE Sgrature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM TITLE ☐ Delete TITLE X Change ■ Addition NAME WATSON, VIRGINIA NAME STREET ADDRESS 138 BUSHNELL PLAZA, #103 STREET ADORESS 2590 W C-48 CITY-ST-ZIP CITY-ST-ZIP BUSHNELL, FL 33513 33513 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CTY-ST-7P CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/2 CITY-ST-7IP 11. I hereby certify that the information supplied with this filing 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.

Virginia

Watson

Water

FILED