

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011403

FILED
Mar 21, 2007
Secretary of State

Entity Name: CHRISTINA D BOONE LLC

Current Principal Place of Business:

4984 LAKE LOWRY ROAD
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

4984 LAKE LOWRY ROAD
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOONE, CHRISTINA D
4984 LAKE LOWRY ROAD
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

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: MGRM () Delete
Name: BOONE, CHRISTINA D
Address: 4984 LAKE LOWRY ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: BOONE, STEPHEN D
Address: 4984 LAKE LOWRY ROAD
City-St-Zip: HAINES CITY, FL 33844

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: CHRISTINA D BOONE

MGRM

03/21/2007

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