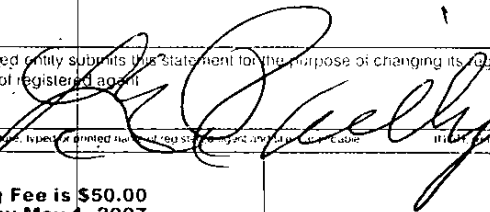
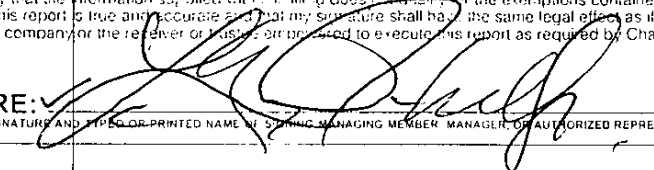


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90030 044 ****50.00

DOCUMENT # L06000011737			
1. Entity Name L & R PROPERTIES-HOMOSASSA, LLC			
Principal Place of Business 3320 SOUTH U.S. HIGHWAY 27/441 FRUITLAND PARK, FL 34731		Mailing Address 3320 SOUTH U.S. HIGHWAY 27/441 FRUITLAND PARK, FL 34731	
2. Principal Place of Business - No P.O. Box # 2160 Highway 27/441 Suite, Apt. #, etc.		3. Mailing Address 2160 Highway 27/441 Suite, Apt. #, etc.	
City & State Fruitland Park, FL Zip 34731 Country United States		City & State Fruitland Park, FL Zip 34731 Country United States	
4. FEI Number 20-4191260		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent PHILLIPS, LARRY M 3320 SOUTH U.S. HIGHWAY 27/441 FRUITLAND PARK, FL 34731		7. Name and Address of New Registered Agent Name Larry m Phillips Street Address (P.O. Box Number is Not Acceptable) 2160 Highway 27/441 City Fruitland Park FL Zip Code 34731	
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 the obligations of registered agent.			
SIGNATURE 		DATE 4/24/07	
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PHILLIPS, LARRY M 3320 SOUTH U.S. HIGHWAY 27/441 FRUITLAND PARK, FL 34731 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Larry m Phillips 2160 Highway 27/441 Fruitland Park, FL 34731 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exceptions 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 for the removal or business purpose to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: 		DATE 4/24/07	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE	