2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 27, 2007
Secretary of State

DOCUMENT# L06000027330

Entity Name: AUSTIN-SANFORD, LLC

Current Principal Place of Business:

11380 PROSPERITY FARMS RD., SUITE 220
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

11380 PROSPERITY FARMS RD.
SUITE 220
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

11380 PROSPERITY FARMS RD., SUITE 220
PALM BEACH GARDENS, FL 33410

New Mailing Address:

8305 SE KETCH COURT
HOBE SOUND, FL 33455

FEI Number: 20-4493521 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANFORD, DAVID
11380 PROSPERITY FARMS RD., SUITE 220
PALM BEACH GARDENS, FL 33410 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: SANFORD, ANDREA
Address: 11380 PROSPERITY FARMS RD., SUITE 220
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM ( ) Delete
Name: SANFORD, DAVID
Address: 11380 PROSPERITY FARMS RD., SUITE 220
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

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: ANDREA SANFORD MGRM 02/27/2007

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