2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033307

Entity Name: SOUTH LOOP, LLC

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

99 NESBIT STREET C/O GARY A. KAHLE
PUNTA GORDA, FL 33950 99 NESBIT STREET
PUNTA GORDA, FL 33950
PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

% GARY A. KAHLE, FARR, FARR, EMERICH, HACK
99 NESBIT STREET
PUNTA GORDA, FL 33950
C/O GARY A. KAHLE
99 NESBIT STREET
PUNTA GORDA, FL 33950
PUNTA GORDA, FL 33950

FEI Number: 20-4885138 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KAHLE, GARY A FARR, FARR, EMERICH, HACKETT AND CARR P.A. 99 NESBIT STREET PUNTA GORDA, FL 33950 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: ADDITIONS/CHANGES:

Title: () Delete Title: MGRM () Change (X) Addition Name: TREWORGY, MIKE

 Name:
 Name:
 TREWORGT, WIRE

 Address:
 Address:
 6161 RIVERSIDE DRIVE

 City-St-Zip:
 City-St-Zip:
 PUNTA GORDA, FL 33982

Title: () Delete Title: MGRM () Change (X) Addition

Name: Name: BISHOP, BRAD

Address: Address: 12607 SW KINGSWAY CIRCLE
City-St-Zip: City-St-Zip: LAKE SUZY, FL 34266

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: MIKE TREWORGY MGRM 04/23/2007