

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034174

FILED  
Jul 10, 2007  
Secretary of State

Entity Name: LEBEAUX LLC

## Current Principal Place of Business:

11261 BROCKTON PL  
JACKSONVILLE, FL 32257 US

## New Principal Place of Business:

14286-19 BEACH BLVD.  
136  
JACKSONVILLE, FL 32250 US

## Current Mailing Address:

11261 BROCKTON PL  
JACKSONVILLE, FL 32257 US

## New Mailing Address:

14286-19 BEACH BLVD.  
136  
JACKSONVILLE, FL 32250 US

FEI Number: 20-2212011      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

LEBEAUX, KELVIN P  
11261 BROCKTON PL  
JACKSONVILLE, FL 32257 US

## Name and Address of New Registered Agent:

LEBEAUX, KELVIN P  
3875 SAN PABLO RD S  
1024  
JACKSONVILLE, FL 32224 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: KELVIN LEBEAUX

07/10/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LEBEAUX, KELVIN P  
Address: 11261 BROCKTON PL  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: MGRM ( ) Delete  
Name: LEBEAUX, JOANN F  
Address: 11261 BROCKTON PL  
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: MGR (X) Delete  
Name: QUADE, DAVID M  
Address: 44547 CLARKS MILL ROAD  
City-St-Zip: HOLLYWOOD, MD 20636 US

Title: MGR (X) Delete  
Name: MINOR, ETHEL M  
Address: 20263 MICHELLE DRIVE  
City-St-Zip: GREAT MILLS, MD 20634 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LEBEAUX, KELVIN P  
Address: 3875 SAN PABLO RD S #1024  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: MGRM (X) Change ( ) Addition  
Name: LEBEAUX, JOANN F  
Address: 3875 SAN PABLO RD S #1024  
City-St-Zip: JACKSONVILLE, FL 32224 US

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 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: KELVIN LEBEAUX

MGRM

07/10/2007

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