2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047154

Apr 14, 2007 Secretary of State

Entity Name: A PERSONAL TOUCH PROPERTY MANAGEMENT SERVICES LLC

Current Principal Place of Business: New Principal Place of Business: 969 SE FEDERAL HWY 400 STUART, FL 34994 **New Mailing Address: Current Mailing Address:** 969 SE FEDERAL HWY STUART, FL 34994 US FEI Number: 20-4868538 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: WILDE, LISA R 969 SE FEDERAL HWY 400 STUART, FL 34994 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: () Change () Addition () Delete WILDE, LISA R Name: Name: Address: 969 SE FEDERAL HWY, 400 Address: City-St-Zip: STUART, FL 34994 City-St-Zip:

Title: MGR () Delete

Name: MULLER, SHERRY A

Address: 13534 BRIGHTSTONE STREET City-St-Zip:

WELLINGTON, FL 33414

Title: MGR Name:

(X) Change () Addition

WILDE, LEON P

Address: 969 SE FEDERAL HWY, 400

City-St-Zip: STUART, FL 34994

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: LISA R WILDE 04/14/2007