

FILED
May 24, 2007 8:00 am
Secretary of State

04-09-2007 90343 016 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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DOCUMENT # L06000051098																							
1. Entity Name SERLEY ASSOCIATES, LLC																							
Principal Place of Business 2112 STALLION RD. CANTONMENT, FL 32533 US			Mailing Address 2112 STALLION RD. CANTONMENT, FL 32533 US																				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																					
Suite, Apt. #, etc.		Suite, Apt. #, etc.																					
City & State		City & State																					
Zip		Country		Zip																			
Country		Country		Country																			
<table style="width: 100%; border: none;"> <tr> <td style="width: 20%; border: none;">01162007</td> <td style="width: 20%; border: none;">Chg-LLC</td> <td style="width: 20%; border: none;">CR2E083 (12/06)</td> <td colspan="3" style="border: none;"></td> </tr> <tr> <td colspan="2" style="border: none;">4. FEI Number 20-4917972</td> <td colspan="4" style="border: none;">Applied For Not Applicable</td> </tr> <tr> <td colspan="4" style="border: none;">5. Certificate of Status Desired <input type="checkbox"/></td> <td colspan="2" style="border: none;">\$5.00 Additional Fee Required</td> </tr> </table>						01162007	Chg-LLC	CR2E083 (12/06)				4. FEI Number 20-4917972		Applied For Not Applicable				5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
01162007	Chg-LLC	CR2E083 (12/06)																					
4. FEI Number 20-4917972		Applied For Not Applicable																					
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required																			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																				
SERLEY, MARK 2112 STALLION RD. CANTONMENT, FL 32533			Name																				
			Street Address (P.O. Box Number is Not Acceptable)																				
			City																				
			FL		Zip Code																		
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 _____																							
<small>Signature, typed or printed name of registered agent (if not applicable) NOTE: Registered Agent signature required when necessary</small>																							
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	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																				
NAME		NAME																					
STREET ADDRESS		STREET ADDRESS																					
CITY - ST - ZIP		CITY - ST - ZIP																					
OWNER / OPERATOR																							
MARK SERLEY																							
2112 STALLION RD																							
CANTONMENT FL 32533																							
MANAGER	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition																				
MARK SERLEY		NAME																					
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CANTONMENT FL 32533		CITY - ST - ZIP																					
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		NAME																					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.																							
SIGNATURE: <u>Mark Serley</u>		Date: <u>3-29-07</u>																					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>																							

30008753



01162007 Chg-LLC CR2E083 (12/06)

4. FEI Number **20-4917972** Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
SERLEY, MARK
2112 STALLION RD.
CANTONMENT, FL 32533

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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**Filing Fee is \$50.00
Due by May 1, 2007**

Make check payable to
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CANTONMENT FL 32533			
MANAGER	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE: Mark Serley

Date: 3-29-07

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