

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052653

FILED
Jan 30, 2007
Secretary of State

Entity Name: GAIL STILLINGS BURCH, LLC

Current Principal Place of Business:

P.O. BOX 730235
ORMOND BEACH, FL 32173

New Principal Place of Business:

12 NORTH RAVENSFIELD LANE
ORMOND BEACH, FL 32174

Current Mailing Address:

P.O. BOX 730235
ORMOND BEACH, FL 32173

New Mailing Address:

FEI Number: 20-4912877 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BURCH, GAIL
12 NORTH RAVENSFIELD LANE
ORMOND BEACH, FL 32174 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: MGR () Delete
Name: BURCH, GAIL
Address: 12 NORTH RAVENSFIELD LANE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

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: GAIL STILLINGS BURCH

MGR

01/30/2007

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