2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2007
Secretary of State

DOCUMENT# L06000054029

Entity Name: AVONLEY DEVELOPMENT, LLC

Current Principal Place of Business:

2509 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308

New Principal Place of Business:

2509 BARRINGTON CIRCLE
SUITE 115
TALLAHASSEE, FL 32308

Current Mailing Address:

2509 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308

New Mailing Address:

2509 BARRINGTON CIRCLE
SUITE 115
TALLAHASSEE, FL 32308

FEI Number: 20-5948439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JARRETT, JAMES
2509 BARRINGTON CIRCLE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

JARRETT, JAMES B
2509 BARRINGTON CIRCLE
SUITE 115
TALLAHASSEE, FL 32308 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: BRAD JARRETT 01/22/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: D ( ) Change (X) Addition
Name: JARRETT, JAMES B
Address: 2509 BARRINGTON CIRCLE, SU. 115
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Change (X) Addition
Name: RUSSELL, DIXIE
Address: 2573 BARRINGTON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

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: BRAD JARRETT D 01/22/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date