2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067907

Entity Name: AC/PEAVY, LLC

Address:

City-St-Zip:

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 871 NW GUERDON STREET 871 NW GUERDON STREET LAKE CITY, FL 32055 LAKE CITY, FL 32055 **Current Mailing Address: New Mailing Address:** P.O. BOX 1829 LAKE CITY, FL 32056 FEI Number: 20-5189692 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: MCRAE & METCALF, P.A. 1677 MAHAN CENTÉR BLVD. TALLAHASSEE, FL 32308 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: () Delete Title: () Change (X) Addition ANDERSON, JOEY H III Name: Name: Address: Address: HWY 349 NORTH City-St-Zip: City-St-Zip: OLD TOWN, FL Title: Title: MGR () Change (X) Addition () Delete Name: Name: PEAVY, DELACY Address: Address: 871 NW GUERDON STREET City-St-Zip: City-St-Zip: LAKE CITY, FL 32055-821 Title: () Delete Title: MGR () Change (X) Addition SCHREIBER, BRIAN Name: Name:

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.

Address:

City-St-Zip:

871 NW GUERDON STREET

LAKE CITY, FL 320551829

SIGNATURE: JODI V. PULS AR 01/18/2007