

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090914

FILED
May 01, 2007
Secretary of State

Entity Name: PATHENRO46 LLC

Current Principal Place of Business:

1405 N 22ND ST
FORT PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

1405 N 22ND ST
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 20-5613926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIS, EVA
1903 AVENUE O
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

DAVIS, EVA
1405 N 22ND ST
FORT PIERCE, FL 34950 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: EVA DAVIS

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HENRY, CHERYL
Address: 1465 23RD ST SW
City-St-Zip: VERO BEACH, FL 32962 US

Title: MGRM () Delete
Name: MOORE, SHIRLEY
Address: 1901 AVENUE O APT B
City-St-Zip: FORT PIERCE, FL 34950 US

Title: MGRM () Delete
Name: ROLLE, SHANTENKA
Address: 605 IXORIA AVENUE
City-St-Zip: FORT PIERCE, FL 34982 US

Title: MGRM () Delete
Name: MITCHELL, FANNIE
Address: 1901 AVE O APT B
City-St-Zip: FORT PIERCE, FL 34950 US

Title: MGRM () Delete
Name: BOYCE, JEFFREY
Address: 715 N 10TH STREET
City-St-Zip: FORT PIERCE, FL 34950 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: ROLLE, SHANTENKA
Address: 1001 AVENUE G
City-St-Zip: FORT PIERCE, FL 34982 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHERYL HENRY

MGRM

05/01/2007

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