2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 19, 2007
Secretary of State

DOCUMENT# L06000105927

Entity Name: OCALA TRADITIONS, LLC

Current Principal Place of Business:

405 EAST SILVER SPRINGS BLVD.
OCALA, FL 34470

New Principal Place of Business:

405 EAST SILVER SPRINGS BLVD.
B
OCALA, FL 34470

Current Mailing Address:

P.O. BOX 6155
OCALA, FL 34478

New Mailing Address:

FEI Number: 27-0146230 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

KING, PAULA C
1238 SE FIFTH STREET
OCALA, FL 34471 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: MGRM ( ) Delete
Name: GREINER, CARMEN
Address: 1621 SE 17TH AVENUE
City-St-Zip: OCALA, FL 34471

Title: MGRM ( ) Delete
Name: KING, PAULA C
Address: 1238 SE FIFTH STREET
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES:

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: PAULA C. KING MM 06/19/2007

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