

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114648

Entity Name: CANOPY ONE, LLC

FILED
Feb 05, 2007
Secretary of State

Current Principal Place of Business:

1607 VILLAGE SQUARE BLVD, STE 8
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

1607 VILLAGE SQUARE BLVD, STE 8
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, STEPHEN K
1607 VILLAGE SQUARE BLVD, STE 8
TALLAHASSEE, FL 32309 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: FOSTER, STEPHEN K
Address: 1607 VILLAGE SQUARE BLVD, STE 8
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM () Delete
Name: FOSTER, JONATHON W
Address: 1607 VILLAGE SQUARE BLVD, STE 8
City-St-Zip: TALLAHASSEE, FL 32309

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 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: STEPHEN K FOSTER

MGRM

02/05/2007

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