2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004208

Entity Name: PCF PROPERTIES, L.C.

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1812 HAZELWOOD DRIVE PO BOX 15069

FT PIERCE, FL 34982 FT PIERCE, FL 34979 US

Current Mailing Address: New Mailing Address:

1812 HAZELWOOD DRIVE PO BOX 15069

FT. PIERCE, FL 34982 FT. PIERCE, FL 34979 US

FEI Number: 65-0974226 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:

GUTHRIE, P.J. 1812 HAZELWOOD DRIVE FT PIERCE, FL 34982

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MGRM Title: MGRM (X) Change () Addition () Delete

FIMIAN, JOHN M Name: Name: FIMIAN, JOHN M Address: 1812 HAZELWOOD DRIVE Address: PO BOX 15069

City-St-Zip: FT. PIERCE, FL 34982 City-St-Zip: FT. PIERCE, FL 34979 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: GUTHRIE, JAMES L JR Name: GUTHRIE, JAMES L JR Address: 1812 HAZELWOOD DRIVE Address: PO BOX 15069

City-St-Zip: FT. PIERCE, FL 34982 City-St-Zip: FT. PIERCE, FL 34979 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: JOHN M FIMIAN **MGRM** 01/05/2007