


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 20, 2007 08:00 AM
Secretary of State

DOCUMENT # L99000008584	
1. Entity Name SOUND DEVELOPMENT, L.C.	

Principal Place of Business PO BOX 1820 PHENIX CITY H, AL 36868	Mailing Address PO BOX 1820 PHENIX CITY H, AL 36868
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DO NOT WRITE IN THIS SPACE



07182007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 63-1238794	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent PEAK, FRED PINNACLE PORT UNIT A136 WEST HIGHWAY 98 PANAMA CITY BEACH, FL 32407

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by September 14, 2007	U000000769764 07/20/07-80004-001 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM COPELAN, GEORGE D PO BOX 1820 PHENIX CITY, AL 36868
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PEAK, FRED D 908 BROAD STREET PHENIX CITY, AL 36868
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM CHRISTIAN, CHRIS 908 BROAD STREET PHENIX CITY, AL 36868
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FUNDERBURKE, KENNETH 908 BROAD STREET PHENIX CITY, AL 36868
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRR KITRELL, KEN P.O. BOX 940 SMITHS, AL 36877
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **7-18-07 334-297-2900**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #