## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000009086

Entity Name: MAKARIOS, L.L.C.

FILED May 16, 2007 Secretary of State

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

2225 A1A SOUTH SUITE C-8

SAINT AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

P.O. BOX 840100

SAINT AUGUSTINE, FL 32080

FEI Number: 59-3614847 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: Name and Address of New Registered Agent:

BROWN, RONALD W ESQUIRE SYKES, W STEVE 66 CUNA STREET, STE A 2225 A1A SOUTH

ST AUGUSTINE, FL 32084 US SUITE C-8

ST AUGUSTINE, FL 32080 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: W STEVE SYKES 05/16/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 COLE, III, SCOTT
 Name:

 Address:
 P.O. BOX 840100
 Address:

 City-St-Zip:
 ST. AUGUSTINE, FL 32080
 City-St-Zip:

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

 Name:
 NEWTON, WALKER L
 Name:

 Address:
 P.O. BOX 840100
 Address:

 City-St-Zip:
 ST. AUGUSTINE, FL 32080
 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: W STEVE SYKES COO 05/16/2007