

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000550

Entity Name: MAPLE COMPANY, L.L.C.

FILED
Feb 19, 2007
Secretary of State

Current Principal Place of Business:

2400 FIRST STREET, STE. 200
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

735 GODDARD AVE
CHESTERFIELD, MO 63005

New Mailing Address:

FEI Number: 43-1860126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUBBARD, STEVEN W
2320 FIRST STREET, SUITE 1000
FORT MYERS, FL 33901 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: FLAGG, ROBERT W
Address: 2400 FIRST STREET, STE. 200
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM (X) Delete
Name: JANSON, CHRISTOPHER P
Address: 735 GODDARD AVE
City-St-Zip: CHESTERFIELD, MO 63005

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JANSON, CHRISTOPHER P
Address: 735 GODDARD AVE
City-St-Zip: CHESTERFIELD, MO 63005

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: CHRISTOPHER JANSON

MRG

02/19/2007

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