

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000726

Entity Name: FPRO-122, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

444 WEST OCEAN BOULEVARD
SUITE 1616
LONG BEACH, CA 90802

New Principal Place of Business:

Current Mailing Address:

444 WEST OCEAN BOULEVARD
SUITE 1616
LONG BEACH, CA 90802

New Mailing Address:

FEI Number: 06-1680462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: KIRKPATRICK, EUGENE R
Address: 444 WEST OCEAN BOULEVARD, SUITE 1616
City-St-Zip: LONG BEACH, CA 90802

Title: MGRE () Delete
Name: KIRKPATRICK, GARY
Address: 444 WEST OCEAN BLVD SUITE 1616
City-St-Zip: LONG BEACH, CA 90802

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 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: GARY KIRKPATRICK

MGRE

04/30/2007

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