


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # M04000003758 1. Entity Name FOURTH QUARTER PROPERTIES XXXIV, LLC	
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Principal Place of Business 45 ANSLEY DRIVE NEWNAN, GA 30263	Mailing Address 45 ANSLEY DRIVE NEWNAN, GA 30263
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DO NOT WRITE IN THIS SPACE



01102008No Chg-LLC      CR2E083 (12/07)

4. FEI Number 33-1100267	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

FROOK, MARGARET S  
 BOONE, BOONE, KODA & FROOK  
 1001 AVENIDO DEL CIRCO  
 VENICE, FL 34285

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000936314  
 05/27/08-80005-016 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THOMAS, STANLEY E 45 ANSLEY DRIVE NEWNAN, GA 30263
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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:**  **Stanley E. Thomas**      **1/14/08**      **678-423-5445**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #