

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005775

FILED  
Jul 18, 2007  
Secretary of State

**Entity Name:** RICHMOND AT FLETCHER INVESTORS, LLC

**Current Principal Place of Business:**

975 JOHSON FERRY ROAD NE  
SUITE 450  
ATLANTA, GA 30342

**New Principal Place of Business:**

**Current Mailing Address:**

975 JOHSON FERRY ROAD NE  
SUITE 450  
ATLANTA, GA 30342

**New Mailing Address:**

FEI Number: 20-3824206      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:**

F&L CORP.  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: L&S CAPITAL HOLDINGS, II, LLC  
Address: 975 JOHSON FERRY ROAD NE, SUITE 450  
City-St-Zip: ATLANTA, GA 30342

Title: MGR ( ) Delete  
Name: RICHMOND, LEA III  
Address: 975 JOHSON FERRY ROAD NE, SUITE 450  
City-St-Zip: ATLANTA, GA 30342

**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: LEA RICHMOND III

MGR.

07/18/2007

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