

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M05000006463

FILED
Jul 15, 2008
Secretary of State**Entity Name:** LOIS PANHANDLE LLC**Current Principal Place of Business:**11540 HIGHWAY 92 EAST
SEFFNER, FL 33584**New Principal Place of Business:****Current Mailing Address:**11540 HIGHWAY 92 EAST
SEFFNER, FL 33584**New Mailing Address:****FEI Number:** 20-3742917**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCINTOSH, ANDREW L
101 E. KENNEDY BLVD., SUITE 2000
TAMPA, FL 33602 US**Name and Address of New Registered Agent:**BEYER, DAVID A
100 NORTH TAMPA STREET, SUITE 2200
TAMPA, FL 33602 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: DAVID A. BEYER

07/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SEAMAN, JEFFREY
Address: 400 PERIMETER CIRCLE TERRACE, SUITE 800
City-St-Zip: ATLANTA, GA 30346

Title: P () Delete
Name: STEIN, LEWIS
Address: 11540 HWY 92 E
City-St-Zip: SEFFNER, FL 33584

Title: V () Delete
Name: FINKEL, JEFFREY
Address: 400 PERIMETER CTR. TERR. STE. 800
City-St-Zip: ATLANTA, GA 30346

Title: V () Delete
Name: WEITZNER, PETER
Address: 400 PERIMETER CTR. TERR., 800
City-St-Zip: ATLANTA, GA 30346

Title: VPTS () Delete
Name: KETTLE, MIKE
Address: 400 PERIMETER CIR TERR STE 900
City-St-Zip: ATLANTA, GA 30346

Title: VPS () Delete
Name: SHEER, JAMIE
Address: 11540 HWY 92 E
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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Title: () Change () Addition
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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: JEFFREY SEAMAN

MGR

07/15/2008

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