2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 04, 2008 08:00 AN DOCUMENT # M06000000323 **Secretary of State** 1. Entity Name AVA & RUFUS, LLC Principal Place of Business Mailing Address 2552 TOMOKA FARMS ROAD 2552 TOMOKA FARMS ROAD PORT ORANGE, FL 32128 PORT ORANGE, FL 32128 01162008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3437676 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WATSON, LINDA CPA DO NOT WRITE 4606 SOUTH CLYDE MORRIS BOULEVARD, STE 1-N PORT ORANGE, FL 32129 IN THIS SPACE 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 agept SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstaung) FILE NOW!!! FEE 18 \$138,75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS TITLE MGR LAPHAM, DIANE F NAME STREET ADDRESS 2552 TOMOKA FARMS ROAD DAYTONA BEACH, FL 32124 CITY-ST-ZIP 000000812929 02/12/08-80067-021 138.75 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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:

386- 763-*258*9