2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004529

City-St-Zip: CHARLOTTE, NC 28203

Entity Name: PARK AVENUE PARTNERS, LLC

FILED Jan 23, 2007 Secretary of State

| Current P | rincipal Place | of Business: | New Principal Place of Business: | |
|---|--|---------------------------------|---|---|
| | PARK AVENU ITE, NC 28203 | | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | PARK AVENU ITE, NC 28203 | | | |
| FEI Number | : 56-2560533 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | Name and Address of New Registered Agent: | |
| 1201 HAY | ATION SERVIC S STREET SSEE, FL 323 | | | |
| | e named entity : e of Florida. | submits this statement for the | purpose of changing its registe | red office or registered agent, or both |
| SIGNATU | RE: | | | |
| | Electror | ic Signature of Registered Ag | ent | Date |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | HENSLEY, A. S | K AVENUE, SUITE B | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: | PLYLER, JAME | Delete S K AVENUE SUITE B | Title: Name: Address: | () Change () Addition |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: A. SCOTT HENSLEY MGR 01/23/2007