2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2007
Secretary of State

DOCUMENT# M94000000103

Entity Name: AOC, LLC

Current Principal Place of Business:

950 HIGHWAY 57 EAST
COLLIERVILLE, TN 38017

New Principal Place of Business:

Current Mailing Address:

950 HIGHWAY 57 EAST
COLLIERVILLE, TN 38017

New Mailing Address:

FEI Number: 62-1576207 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:	MGRM	( ) Delete
Name:	THE ALPHA CORPORATIO, N OF TENNESSEE	
Address:	175 COMMERCE ROAD, 2ND FLOOR	
City-St-Zip:	COLLIERVILLE, TN 38017	
Title:	MGR	( ) Delete
Name:	NORMAN, FREDERICK S	
Address:	950 HIGHWAY 57 EAST	
City-St-Zip:	COLLIERVILLE, TN 38017	
Title:	MGR	( ) Delete
Name:	GRIGGS, JOHN W	
Address:	950 HIGHWAY 57 EAST	
City-St-Zip:	COLLIERVILLE, TN 38017	
Title:	MGR	( ) Delete
Name:	WEGHORST, RANDALL A	
Address:	950 HIGHWAY 57 EAST	
City-St-Zip:	COLLIERVILLE, TN 38017	

ADDITIONS/CHANGES:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	MGR	(X) Change ( ) Addition
Name:	WATKINS, MATTHEW M	
Address:	950 HIGHWAY 57 EAST	
City-St-Zip:	COLLIERVILLE, TN 38017	
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: STEVE JAMESON SMTS 03/26/2007

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