2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M99000000211

1. Entity Name
TWIN OAKS POLO, LLC



FILED Jan 29, 2007 08:00 AM Secretary of State

Principal Place of Business

SUITE 600 KRYSTAL BUILDING CHATTANOOGA, TN 37402 Mailing Address

SUITE 600 KRYSTAL BUILDING CHATTANOOGA, TN 37402



01162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 62-1763353 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL. 33331

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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 agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE MAME STREET ADDRESS CITY-ST-ZIP	MGR CUZZORT, PAMALA K SUITE 600 KRYSTAL BUILDING CHATTANOOGA, TN 37402		U00000608935 02/01/07-80030-009 50:00	
TATLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JOHNSTON, S.K. III SUITE 600 KRYSTAL BUILDING CHATTANOOGA, TN 37402		02/ 0 1/07-80030-009 \$0.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE	
TOTLE HAME 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: Campala Kungget Pamala K. Cuzzort 1/24/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING WANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE
Date

423-756-120Z

Daytime Phone #