2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

May 01, 2006 08:00 AM Secretary of State DOCUMENT # L04000065838 1. Entity Name CIRCA 1928 LLC Principal Place of Business Mailing Address 5938 RIVER ROAD 593B RIVER ROAD NEW PORT RICHEY, FL 34652 US NEW PORT RICHEY, FL 34652 04252006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MAGRUDER, SONIA DO NOT WRITE 5938 RIVER ROAD NEW PORT RICHEY, FL 34652 IN THIS SPACE 6. 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 rematating) Filing Fee is \$50.00 Bue by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME MAGRUDER, SONIA 5938 RIVER ROAD STREET ADDRESS CITY-ST-ZIF NEW PORT RICHEY, FL 34652 MGRM TITLE U00000547110 NAME MAGRUDER, DOUGLAS JR. 05/12/06-80011-005 50.00 STREET ADDRESS 5938 RIVER ROAD CITY-ST-ZIP NEW PORT RICHEY, FL 34652 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CXTY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-77P 11. It hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florids Statutes. If 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.

WHER OR AUTHORIZED REPRESENTATIVE

magruder

Sonia

FILED

Daytime Phone #