2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2006
Secretary of State

DOCUMENT# L01000001796

Entity Name: PANDORA SOFTWARE SYSTEMS, LLC

Current Principal Place of Business:

1704 WHISPERING DRIVE E
LARGO, FL 33771

New Principal Place of Business:

10104 MIZNER STREET
NEW PORT RICHEY, FL 34655

Current Mailing Address:

1704 WHISPERING DRIVE E
LARGO, FL 33771

New Mailing Address:

10104 MIZNER STREET
NEW PORT RICHEY, FL 34655

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MORGAN, CHRISTOPHER H
1704 WHISPERING DRIVE E
LARGO, FL 33771 US

Name and Address of New Registered Agent:

MORGAN, CHRISTOPHER H
10104 MIZNER STREET
NEW PORT RICHEY, FL 34655 US

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: CHRISTOPHER H MORGAN 05/11/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MORGAN, CHRISTOPHER H
Address: 1704 WHISPERING DRIVE E
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MORGAN, CHRISTOPHER H
Address: 10104 MIZNER STREET
City-St-Zip: NEW PORT RICHEY, FL 34655

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: CHRISTOPHER H MORGAN MGRM 05/11/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date