2007 LIMITED LIABILITY COMPANY

Jan 25, 2007 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # L01000011874** 01-25-2007 90087 001 ****50.00 1. Entity Name 1776, L.L.C. Principal Place of Business Mailing Address 213 THE ESPLANADE SOUTH 213 THE ESPLANADE SOUTH VENICE, FL 34285 VENICE, FL 34285 01142007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0172511 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PACHOTA, MICHAEL DO NOT WRITE 213 THE ESPLANADE SOUTH VENICE, FL 34285 IN THIS SPACE 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 MANAGING MEMBERS/MANAGERS 9. TITLE PACHOTA, MICHAEL V NAME 213 THE ESPLANADE SOUTH STREET ADDRESS VENICE, FL 34285 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling 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 of the precious of trustee ampowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED