2006 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 10, 2006 08:00 AM DOCUMENT # L02000003183 **Secretary of State** 1. Entity Name TERNBUX, LLC Principal Place of Business Mailing Address 7610 U.S. HICHWAY 41 NORTH 7610 U.S. HIGHWAY 41 NORTH PALMETTO, FL 34221 PALMETTO, FL 34221 01252008 No Chg LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 03-0406611 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LYERLY, JAMES S DO NOT WRITE 7610 US HWY 41 NORTH PALMETTO, FL 34221 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 Florids. I am familiar with, and accept the obligations of registered agent. Signature, typed or protect name of registered agent and tris if applicable. (NOTE: Hegistered Agent agnature required when remeating) DATE Filing Fee is \$50.00 Due by May 1, 2006 U00000499828 04/24/06-80044-016 50.00 9. MANAGING MEMBERS/MANAGERS TITLE MARKE LYERLY, JAMES S STREET ADDRESS 7610 US HWY 41 NORTH City-SI-7P PALMETTO, FL 34221 TITLE NAME STREET ADDRESS CATY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP THE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS 037-51-ZP TIRE 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 or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZP

R PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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