2006 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Apr 20, 2006 08:00 AN Secretary of State DOCUMENT # L02000004031 1. Entity Name MONEY BAYOU, LLC Mailing Address Principal Place of Business **5746 CENTERVILLE ROAD 5746 CENTERVILLE ROAD** TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309 03102006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0614507 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GIBSON, TOM DO NOT WRITE 206 E 4TH ST PORT SAINT JOE, FL 32456 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, 2006 9. MANAGING MEMBERS/MANAGERS TITLE MGRM HARDMAN, PATRICIA K NAME 5746 CENTERVILLE ROAD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32309 U00000520573 ns/n2/06-80099-015 50.00 TITLE MAME 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

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.

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

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #