


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000005496

1. Entity Name
FORE MEDIA, LLC



Principal Place of Business 943 FORT KING STREET OCALA, FL 34471	Mailing Address PO BOX 1358 OCALA, FL 34478
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DO NOT WRITE IN THIS SPACE



01092006No Chg-LLC CR2E083 (11/05)

4. FEI Number 01-0672118	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**NEEDHAM, KAREN F
943 FORT KING STREET
OCALA, FL 34471**

**DO NOT WRITE
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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2006**

B. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEEDHAM, KAREN F 2139 SE 7TH TERR OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FORE, MERRITT C JR 1109 SE 5TH ST OCALA, FL 34471
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04/08/06-80044-005 50.00

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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 609, Florida Statutes.

SIGNATURE: *Karen F. Needham* **3-22-06** **352-733-7597**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #