

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000006858

1. Entity Name
LOG, LLC



Principal Place of Business

**255 SOUTH ORANGE AVE.
SUITE 1700
ORLANDO, FL 32801**

Mailing Address

**255 SOUTH ORANGE AVE.
SUITE 1700
ORLANDO, FL 32801**

DO NOT WRITE IN THIS SPACE



01302008 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

51-0468930

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SAATHOFF, DWIGHT ESQ.
255 SOUTH ORANGE AVE.
SUITE 1700
ORLANDO, FL 32801**

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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, 2008**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
AUFSEESSER, ERNST
C/O 21, RUE DU MT BLANC
GENEVA, SWITZERLAND.**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
KURZ, PIERRE
C/O 21, RUE DU MT BLANC
GENEVA, SWITZERLAND.**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
WEBER, JEAN-PIERRE
BELCHENSTR 19
BASLE SW,**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000517357
05/01/06-80041-011 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 608, Florida Statutes.

SIGNATURE:

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

3/27/06

Date

Daytime Phone #