2006 LIMITED LIABILITY COMPANY

CITY - ST - 7IP

SIGNATURE:

FILED ANNUAL REPORT May 03, 2006 08:00 AM Secretary of State DOCUMENT # L02000012364 1. Entity Name EDO CHANCO, L.C. Principal Place of Business Mailing Address 2038 HENLEY PLACE 2038 HENLEY PLACE FT. MYERS, FL 33901 FT. MYERS, FL 33901 04262006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0055425 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MAHER, WILLIAM A DO NOT WRITE 2038 HENLEY PLACE FT. MYERS, FL 33901 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 moistered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) DATE Filing Fee is \$50.006 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. IME CHAN, RICHARD S STREET ADDRESS 2038 HENLEY PLACE CITY-ST-ZIP FT. MYERS, FL 33901 U00000562762 05/19/06-80068-014 50.00 TITLE MAHER, WILLIAM A NAME STREET ADDRESS 2038 HENLEY PL CITY-ST-ZIP FORT MYERS, FL 33901 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 MLE NAME STREET ADDRESS

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 exemptions of true execute this report as required by Chapter 608, Florida Statutes.

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