


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L02000014737 1. Entity Name WALLACE GLOBAL INVESTMENTS, LLC	
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Principal Place of Business 6653 19TH STREET EAST SARASOTA, FL 34243	Mailing Address 6653 19TH STREET EAST SARASOTA, FL 34243
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DO NOT WRITE IN THIS SPACE



04192006No Chg-LLC CR2E083 (11/05)

4. FEI Number 04-3690608	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**WALLACE, BRIAN T
917 DOG KENNEL RD
SARASOTA, FL 34240**

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

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WALLACE, BRIAN 917 DOG KENNEL RD SARASOTA, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WALLACE, WAYNE 5605 CATALYST AVE SARASOTA, FL 34233
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05/06/06-80100-001 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: Bdw 4/19/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #