## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000020909

Entity Name: CABLE DOWN LLC

FILED Apr 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4618 BAYWOOD DR 3391 STATE AVE

LYNN HAVEN, FL 32444 US PANAMA CITY, FL 32405 US

Current Mailing Address: New Mailing Address:

4618 BAYWOOD DR 3391 STATE AVE

LYNN HAVEN, FL 32444 US PANAMA CITY, FL 32405 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GADDIE, BARBARA C GADDIE, BARBARA C 4618 BAYWOOD DR 3391 STATE AVE

LYNN HAVEN, FL 32444 US PANAMA CITY, FL 32405 US

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.

SIGNATURE: BARBARA C. GADDIE 04/13/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 GADDIE, BARBARA C
 Name:
 GADDIE, BARBARA C

 Address:
 4618 BAYWOOD DR
 Address:
 3391 STATE AVE

City-St-Zip: LYNN HAVEN, FL 32444 US City-St-Zip: PANAMA CITY, FL 32405 US

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MOORE, LAURA H
 Name:

 Address:
 13911 BACK BEACH RD #327
 Address:

 City-St-Zip:
 PANAMA CITY BEACH, FL 32413 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BARBARA C. GADDIE RA 04/13/2006