## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028981

Entity Name: A SQUARED POTENTIAL LLC

FILED Feb 15, 2006 Secretary of State

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

350 SW VIOLET AVENUE 4393 GATOR TRACE LANE PORT SAINT LUCIE, FL 34983 US FORT PIERCE, FL 34982 US

Current Mailing Address: New Mailing Address:

350 SW VIOLET AVENUE 4393 GATOR TRACE LANE PORT SAINT LUCIE, FL 34983 US FORT PIERCE, FL 34982 US

FEI Number: 41-2068723 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

STERN, EDWIN STERN, EDWIN M
350 SW VIOLET AVENUE 4393 GATOR TRACE LANE
PORT SAINT LUCIE, FL 34983 US FORT PIERCE, FL 34982 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: EDWIN M. STERN 02/15/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 STERN, EDWIN M
 Name:
 STERN, EDWIN M

 Address:
 350 SW VIOLT AVENUE
 Address:
 4393 GATOR TRACE LANE

 City-St-Zip:
 PORT SAINT LUCIE, FL 34983 US
 City-St-Zip:
 FORT PIERCE, FL 34982 US

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition
Name: STERN, MARLENE Name: STERN, MARLENE
Address: 4203 CATOR TRACE LANE

Address: 350 SW VIOLET AVENUE Address: 4393 GATOR TRACE LANE
City-St-Zip: PORT SAINT LUCIE, FL 34983 US City-St-Zip: FORT PIERCE, FL 34982 US

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STERN, AARON
 Name:

 Address:
 6008 SPRINGFIELD ST
 Address:

 City-St-Zip:
 JACKSON, MI 49203 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: EDWIN M. STERN MGR 02/15/2006