2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 17, 2006 8:00 am Secretary of State

DOCUMENT # L02000031346 1. Entity Name VICI MARKETING GROUP, LLC				01-17-2006	90060 044 ****5	50.00	
Principal Place of Business 14001 63RD WAY N. CLEARWATER, Ft. 33760	Mailing Address 14001 63RD WAY N. CLEARWATER, FL 3376	60					
2. Principal Place of Business 1/5/5/66+1 ST W.	3. Mailing Address // 5 / 5 / 66 **	ST N.					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		01102006	Chg-LLC	CR2E083 (11/05)		
City & State Largo Florida	City & State Largo Floor	cida	4. FEI Numb 41-206		⊢	pplied For ot Applicable	
Zip Country 33-773- Cinellas	Zip 33.7-7-3	Country		of Status Desired	\$5.00 Add	ditional	
6. Name and Address of Current		TINEIRS	7. Name and	Address of New R		· · ·	
MCGINTY A EDWARD		Name					
MCGINTY, A. EDWARD 101 E KENNEDY BLVD, STE 2800 TAMPA, FL 33602		Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
		City			FL Zip Cod	le	
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 a	more the mapping the transfer that the	Tropisioned rigidity argument redu	men and action of the late of h		DATE		
Signature, typed or printed name of registered agent: Filling Fee is \$50.00 Due by May 1, 2006	no use ii approcesse.	Trograma or Agon a symmetric toda			e check payable to Department of Stat	e	
Filing Fee is \$50.00		10.			e check payable to Department of Stat	8	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE		10.		Florida ADDITIONS/	e check payable to Department of Stat	e Addition	
Filing Fee is \$50.00 Due by May 1, 2006	RS/MANAGERS	10.		Florida ADDITIONS/	e check payable to Department of Stat CHANGES		
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	112, Scott 515 64# 0-90, F	Florida ADDITIONS/	e check payable to Department of Stat CHANGES		
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME POIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florida ADDITIONS/	e check payable to Department of Stat CHANGES Change	Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida ADDITIONS/	e check payable to Department of Stat CHANGES Change	Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida ADDITIONS/	e check payable to Department of Stat CHANGES Change	Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida ADDITIONS/	e check payable to Department of Stat CHANGES Change Change	Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-SI-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	RS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME		Florida ADDITIONS/	e check payable to Department of Stat CHANGES Change Change	Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	RS/MANAGERS Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida ADDITIONS/	e check payable to Department of Stat CHANGES Change Change	Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE P NAME ROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	RS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change	Addition Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE PROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-SI-ZIP CLEARWATER, FL 33760 IITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP IITLE NAME STREET ADDRESS CITY-SI-ZIP IITLE NAME STREET ADDRESS CITY-SI-ZIP	RS/MANAGERS Delete Delete Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change Change	Addition Addition Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE PROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	RS/MANAGERS Delete Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change	Addition Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE NAME ROIX, SCOTT STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	RS/MANAGERS Delete Delete Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change Change	Addition Addition Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE PROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-SI-ZIP	RS/MANAGERS Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change Change	Addition Addition Addition Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE NAME ROIX, SCOTT STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33760 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	RS/MANAGERS Delete Delete Delete	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change Change	Addition Addition Addition	
Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBE TITLE PROIX, SCOTT STREET ADDRESS 14001 63RD WAY N. CITY-ST-ZIP CLEARWATER, FL 33760 IIILE NAME STREET ADDRESS CITY-ST-ZIP IIILE	RS/MANAGERS Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florida ADDITIONS/	check payable to Department of Stat CHANGES Change Change Change	Addition Addition Addition Addition	

The reby certify that the information supplied with this lang does not qualify for ne exemptions contained in Chapter 119, Florida Statutes. Turther 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, MANAGER, OR AUTHORIZED REPRESENTATIVE

1/10/06 727-533 8730