

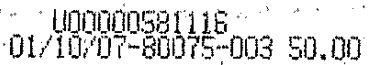


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000031798		
1. Entity Name SAVANTIQUES LLC		
Principal Place of Business 1750 BAYWOOD WAY SARASOTA, FL 34231	Mailing Address 1750 BAYWOOD WAY SARASOTA, FL 34231	 01052007No Chg-LLC CR2E083 (11/05) 4. FEI Number 54-2085698 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required Applied For Not Applicable
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HOPKINS, F. THOMAS ICARD, MERRILL, CULLIS, TIMM, FUREN, ET AL 2033 MAIN STREET, STE. 600 SARASOTA, FL 34237		
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 _____ <small>Signature: typed or printed name of registered agent and title if applicable</small>		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LLOYD, NICHOLAS A JR 1750 BAYWOOD WAY SARASOTA, FL 34231	
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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: <i>Nicholas A. Lloyd Jr.</i> NICHOLAS A. LLOYD JR. 01-05-07 941-921-2708 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>