

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006391

FILED
Apr 18, 2007
Secretary of State

Entity Name: THE MASTERS COUNCIL, L.L.C.

Current Principal Place of Business:

%CLOCKWORK, 2 N. TAMIAMI TRAIL, STE. 506
SARASOTA, FL 34236

New Principal Place of Business:

%CLOCKWORK, PLAZA FIVE POINTS
50 CENTRAL AVENUE, SUITE 920
SARASOTA, FL 34236

Current Mailing Address:

%CLOCKWORK, 2 N. TAMIAMI TRAIL, STE. 506
SARASOTA, FL 34236

New Mailing Address:

%CLOCKWORK, PLAZA FIVE POINTS
50 CENTRAL AVENUE, SUITE 920
SARASOTA, FL 34236

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

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLOCKWORK HOME SERVI, CES
Address: 2 N. TAMIAMI TRAIL, SUITE 506
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CLOCKWORK HOME SERVI, CES
Address: 50 CENTRAL AVENUE, SUITE 920
City-St-Zip: SARASOTA, FL 34236

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: ROBERT F. BECKMANN

SEC

04/18/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date