## **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## FILED Jan 08, 2007 08:00 AM **DOCUMENT # L03000027981 Secretary of State** 1. Entity Name A HIGHER LEVEL, L.L.C. Principal Place of Business Mailing Address ROBERT G. BAUERSACHS, JR. ROBERT G. BAUERSACHS, JR. 6287 BAHIA DEL MAR CIRCLE, APT. 608 6287 BAHIA DEL MAR CIRCLE, APT. 608 ST. PETERSBURG, FL 33715 ST. PETERSBURG, FL 33715 01032007No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 32-0085472 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BAUERSACHS, ROBERT G JR. DO NOT WRITE 6287 BAHIA DEL MAR CIRCLE, APT. 608 ST. PETERSBURG, FL 33715 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. Filling Fee Is \$50.00 Due by May 1, 2007 U00000578320 01/09/07-80025-007 50.00 MANAGING MEMBERS/MANAGERS 9. TITLE BAUERSACHS, ROBERT G JR. 6287 BAHIA DEL MAR CIRCLE, APT. 608 STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG, FL 33715 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

01-03-2007