2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029656

Entity Name: TALMADGE STUDIOS, LLC

FILED Apr 28, 2006 Secretary of State

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

1129 FLEMING ST. 926 TRUMAN AVE. KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

926 TRUMAN AVE KEY WEST, FL 33040

FEI Number: 75-3126501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KELLEY, ALBERT L 926 TRÚMAN AVE KEY WEST, FL 33040

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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

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

HEYWARD, TALMADGE HEYWARD, TALMADGE Name: Name: Address: 1129 FLEMING ST. Address: 1100 SOUTH ST. City-St-Zip: KEY WEST, FL 33040 US City-St-Zip: KEY WEST, FL 33040 US

Title: MGRM () Delete Title: () Change () Addition

Name: RHOADES, SHIRRELL Name: Address: 814 GRINNELL ST. Address: City-St-Zip: KEY WEST, FL 33040 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

KELLEY, ALBERT L Name: Name: Address: 926 TRUMAN AVE. Address: City-St-Zip: KEY WEST, FL 33040 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: ALBERT L. KELLEY **MGRM** 04/28/2006