2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 11, 2005
Secretary of State

DOCUMENT# L03000032052

Entity Name: AMERICAN FAMILY BOOKS, L.L.C.

Current Principal Place of Business:

128 CUMMINGS ROAD
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

128 CUMMINGS ROAD
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 20-0776671 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SANDERS, ABIGAIL K
24 WEST CHASE STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

CARTER, MARGIE A
128 CUMMINGS RD.
PENSACOLA, FL 32503 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: MARGIE A. CARTER 09/11/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CARTER, THOMAS
Address: 128 CUMMINGS ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM ( ) Delete
Name: CARTER, MARGIE
Address: 128 CUMMINGS ROAD
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: AMERICAN FAMILY BOOK, S, LLC
Address: 128 CUMMINGS ROAD
City-St-Zip: PENSACOLA, FL 32503

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGIE A. CARTER MGRM 09/11/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date