

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 19, 2007 8:00 am
Secretary of State

02-19-2007 90197 042 ****50.00

DOCUMENT # L03000039844
1. Entity Name
ADVANCED MEDIA & MARKETING, L.L.C.



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| Principal Place of Business 1745 U.S. 27 SOUTH SEBRING, FL 33870 | Mailing Address 1745 U.S. 27 SOUTH SEBRING, FL 33870 |
|--|--|

60016559



DO NOT WRITE IN THIS SPACE

02152007 No Chg-LLC CR2E083 (11/05)

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|-----------------------------|-------------------------------|
| 4. FEI Number 20-0338527 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

MACBETH, J.ROSS
2543 U.S. 27 SOUTH
SEBRING, FL 33870

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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 _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM FOSTER, KEITH E PRES. 1745 HWY 27 SOUTH SEBRING, FL 33870 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MCLEAN, JOHN S VP 1745 HWY 27 SOUTH SEBRING, FL 33870 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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: *John McLean* **JOHN MCLEAN, V.P.** **2-15-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #