2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Apr 29, 2005 08:00 AM Secretary of State **DOCUMENT # L03000042929** CONSTANT THREAT, LLC Principal Place of Business Mailing Address 116 HWY. 98 E. P.O. BOX 1715 DESTIN, FL 32541 DESTIN, FL 32540 01122005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0838782 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent KILPATRICK, WILLIAM G JR. DO NOT WRITE 35008 EMERALD COAST PKWY., STE. 202 DESTIN, FL 32541 IN THIS SPACE 3. 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstitting) DATE Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGR TITLE LAIRD, HUBERT A NAME STREET ADDRESS 116 HWY. 98 E. CGY-ST-7P DESTIN, FL 32541 TITLE NAME STREET ADDRESS U00000344440 --- 04/23/05-80137-006 50.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITI F IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify 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 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 emgowered to execute this report as required by Chapter 608, Florida Statutes.