2007 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 16, 2007 08:00 A Secretary of State **DOCUMENT # L03000049555** 1. Entity Name MICHAEL G. PRESLAR, L.L.C. Principal Place of Business Mailing Address **5810 WESTPORT LANE 5810 WESTPORT LANE** NAPLES, FL 34116 NAPLES, FL 34116 04072007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0014068 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent PRESLAR, MICHAEL G DO NOT WRITE **5810 WESTPORT LANE** NAPLES, FL 34116 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. Soneture, woed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remetating) Filing Fee Is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME PRESLAR, MICHAEL G STREET ADDRESS 5810 WESTPORT LANE U00000710213 04/25/07-80034-016 50.00 NAPLES, FL 34116 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7P

IN THIS SPACE

olied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information first 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 of trustee epipowered to execute this report as required by Chapter 608, Florida Statutes. I hereby certify that the information suppli-indicated on this report is true and accept limited liability company or the receiper participant.

SIGNATURE:

TITLE

STREET ADDRESS CATY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED