2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGE

Feb 13, 2006 08:00 AM Secretary of State DOCUMENT # L04000004055 1. Entity Name TIMBERLAKE, LLC Mailing Address Principal Place of Business **401 FERGUSON DRIVE 401 FERGUSON DRIVE** ORLANDO, FL 32805 ORLANDO, FL 32805 CR2E083 (11/05) 01052008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0730354 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CAWTHON, FRANK H JR. **401 FERGUSON DRIVE** ORLANDO, FL 32805 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. SIGNATURE Signature, typed or printed nerine of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS \$. MGRM TITLE CAWTHON, FRANK HUR. NAME **401 FERGUSON DRIVE** STREET ADDRESS ORLANDO, FL 32805 CITY-ST-ZIP TITLE U00000432417 02/23/06-80068-014 50.00 NAME STREET ADDRESS CITY-SI-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE ane NAME STREET AUCHESS CITY-ST-ZIP 1117F 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 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.

G MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED