## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005757

Entity Name: LSG GEAR, LLC

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3107 SPRING GLEN ROAD P.O. BOX 441482

SUITE 200 JACKSONVILLE, FL 32244 US JACKSONVILLE, FL 32207 US

Current Mailing Address: New Mailing Address:

3107 SPRING GLEN ROAD P.O. BOX 441482

SUITE 200 JACKSONVILLE, FL 32244 US JACKSONVILLE, FL 32207 US

FEI Number: 20-1624347 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INTREPID REGISTERED AGENT SERVICES, LLC ONE INDEPENDENT DRIVE SUITE 1200 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

## ADDITIONS/CHANGES:

e: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 LEONARD, THEODORE
 Name:
 LEONARD, THEODORE

 Address:
 3107 SPRING GLEN ROAD
 Address:
 P.O. BOX 441482

City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32244 US

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 KEMP, CHARLES
 Name:
 KEMP, CHARLES

 Address:
 3107 SPRING GLEN ROAD
 Address:
 P.O. BOX 441482

City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32244 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: RICHARD, CLAYVIN Name: RICHARD, CLAYVIN

Address: 3107 SPRING GLEN ROAD Address: P.O. BOX 441482

City-St-Zip: JACKONSVILLE, FL 32207 US City-St-Zip: JACKSONVILLE, FL 32244 US

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

Name:SUMTER, RODNEYName:Address:3107 SPRING GLEN ROADAddress:City-St-Zip:JACKSONVILLE, FL 32207 USCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: THEODORE LEONARD MGR 04/28/2006