04-28-2005 14:24 KENRICK P. SPENCE

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90018 022 ****50.00

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04282005 Chg-LLC CR2E083 (10/03)

DOCUMENT # L04000015812

1. Entity Name
INTERNATIONAL PORTFOLIO GALLERY, LLC

Principal Place of Business	Mailing Address
800 EDGEWATER DR. ORLANDO, FL 32804 US	800 EDGEWATER DR. ORLANDO, FL 32804 US
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 75-3148051 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EDWARDS, ELOISE 800 EDGEWATER DR. ORLANDO, FL 32804	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 name 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

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGR NAME: EDWARDS, ELOISE STREET ADDRESS: 800 EDGEWATER DR CITY-ST-ZIP: ORLANDO, FL 32804	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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chk #723
$50.00
5/01/06

11. I hereby certify that the information supplied with this filing 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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [signature] 05/01/06

Signature and typed or printed name of managing member, manager, or authorized representative. Date

Daytime Phone #