


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 14, 2006 08:00 AM
Secretary of State**

| | | |
|---|---|---|
| DOCUMENT # L04000017476 1. Entity Name MY SECOND HEART PRODUCTIONS, LLC | |  |
| Principal Place of Business 4421 NE 11TH ST. OCALA, FL 34470 US | Mailing Address 4421 NE 11TH ST. OCALA, FL 34470 US | |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent GEORGE, NICHOLAS M 4421 NE 11TH ST. OCALA, FL 34470 | | DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | |
| Filing Fee is \$30.00 Due by May 1, 2006 | | |
| 9. MANAGING MEMBERS/MANAGERS | | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM GEORGE, NICHOLAS M 4421 NE 11TH ST. OCALA, FL 34470 | |
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| 11. I hereby certify that the information supplied with this filing 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. SIGNATURE: <u>Nicholas M. George</u> NICHOLAS M. GEORGE 4-12-06 (352)361-3500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> | | |



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CR2E083 (11/05)

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| 4. FEI Number 55-0861785 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |

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