2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SUBJECT ADDRESS CSTY-ST-ZiP

Apr 28, 2006 08:00 AM Secretary of State DOCUMENT # L04000018090 1. Entity Name SPRING STREET, LLC Mailing Address Principal Place of Business 711 SE ST. LUCIE BLVD. STUART, FL. 34996 711 SE ST. LUCIE BLVD. STUART, FL 34996 · ***** 04052006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1361509 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE KEMPE, JOSEPH C ESQ. C/O JOSEPH P. KEMPE, P.A. 941 NORTH HIGHWAY A1A IN THIS SPACE JUPITER, FL 33477 6. 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, 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 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM U00000541427 HAME REGO HOLDINGS LIMITED PARTNERSHIP 05/10/06-80058-011 50.00 711 SE ST. LUCIE BLVD. STREET ADDRESS CITY-ST-ZIP STUART, FL 34996 TITLE NAME STREET ACCRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP mie NAME

FILED

SIGNATURE AND TYPED OR FRINTED HAME OF SIGNING MAN. ER, OR AUTHORIZED REPRESENTATIVE

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.