

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 24, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000019159

1. Entity Name
MORNING SONG, LLC



Principal Place of Business
**3300 PUBLIX CORPORATE PARKWAY
LAKELAND, FL 33811-3311**

Mailing Address
**P.O. BOX 32018
LAKELAND, FL 33802-2024**



04172006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**ATTAWAY, JOHN A JR
3300 PUBLIX CORPORATE PKWY
LAKELAND, FL 33811-3002**

**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 _____

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

U00000531694
05/06/06-80052-021 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	S
NAME	ATTAWAY, JOHN A JR
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 33811

TITLE	P
NAME	CHARTLON, SCOTT
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 33811

TITLE	VPT
NAME	PHILLIPS, DAVID P
STREET ADDRESS	3300 PUBLIX CORPORATE PKWY
CITY-ST-ZIP	LAKELAND, FL 33811

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

John A. Attaway 3-04/20/06 863-688-7401

Date

Daytime Phone #