

**FILED**  
**Jul 19, 2006 8:00 am**  
**Secretary of State**

07-19-2006 90094 001 \*\*\*\*50.00

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

<b>DOCUMENT # L04000026806</b>			
1. Entity Name INGRAM 3D, LLC			
Principal Place of Business 6913 HARNEY ROAD TAMPA, FL 33617		Mailing Address 6913 HARNEY ROAD TAMPA, FL 33617	
<b>DO NOT WRITE IN THIS SPACE</b>			
		 07132006 No Chg-LLC CR2E083 (11/05)	
		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent  CARNEY, SEAN 6913 HARNEY ROAD TAMPA, FL 33617			<b>DO NOT WRITE IN THIS SPACE</b>
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, or typed printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$50.00 Due by September 6, 2006			
9. MANAGING MEMBERS/MANAGERS			
TITLE	MGRM		
NAME	CARNEY, LORITA		
STREET ADDRESS	6913 HARNEY ROAD		
CITY-ST-ZIP	TAMPA, FL 33617		
TITLE	MGR		
NAME	INGRAM, LOGAN		
STREET ADDRESS	120 S. SMOKEY MTN. RD.		
CITY-ST-ZIP	SEFFNER, FL 33584		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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 606, Florida Statutes.			
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>			
Date _____ Daytime Phone # _____			