2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 13, 2006 08:00 AM **DOCUMENT # L04000028252 Secretary of State** 1. Entity Name JOHNSON BROTHERS SOUTH, LLC Principal Place of Business Mailing Address 1150 CLEVELAND STREET, SUITE 301 209 S. FOURTH AVE. CLEARWATER, FL 33755 C-1 ANN ARBOR, MI 48104 02092006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-6820095 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FOOTE, SALLY H ESQ DO NOT WRITE THOMPSON & FOOTE, P.A. 1150 CLEVELAND STREET, SUITE 301 IN THIS SPACE CLEARWATER, FL 33755 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, typed or printed name of registered agent and fitte & applicable. (NOTE: Registered Agent signature required when reinstating) CATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME JOHNSON, DONOVAN STREET ADDRESS 1150 CLEVELAND STREET, SUITE 301 CITY-ST-ZIP CLEARWATER, FL 33755 TITLE NAME U000000432443 STREET ADDRESS 02/23/06-80068-023 50.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

<u> 2-9-06 (134) 665-8455</u> SIGNATURE: 4

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.