## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000031441

Entity Name: PHUNKSTOCK, LLC

FILED Apr 28, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

726 EMMA STREET 1018 TRUMAN AVE

KEY WEST, FL 33040 APT#3

KEY WEST, FL 33040

**Current Mailing Address: New Mailing Address:** 

P O BOX 401

KEY WEST, FL 33041

FEI Number: 20-1070139 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DONOHUE, JOHN D MERRITT, DANIEL B 726 EMMA STREET 1018 TRUMAN AVENUE KEY WEST, FL 33040 US APT#3

KEY WEST, FL 33040 US

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.

SIGNATURE: DANIEL BRUCE MERRITT 04/28/2006

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change ( ) Addition

MERRITT, DANIEL MERRITT, DANIEL Name: Name: 726 EMMA STREET Address: 1018 TRUMAN AVENUE Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

DONOHUE, JOHN D Name: DONOHUE, JOHN D Name: Address: 726 EMMA STREET Address: 1501 LEON STREET City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: MGRM () Delete Title: () Change () Addition EK, JESPER Name: Name: Address: 68 SANDS ROAD Address:

BIG PINE KEY, FL 33043 City-St-Zip: City-St-Zip:

Title: () Delete Title: MGRM ( ) Change (X) Addition

Name: Name: MERRITT, TIMOTHY S

Address: Address: 4425 149TH AVENUE NORTH WEST

City-St-Zip: City-St-Zip: ANDOVER, MN 55304

Title: () Delete Title: MGRM ( ) Change (X) Addition

EK, VICTOR Name: Name:

POSTILJONSVAGEN 36 Address: Address: City-St-Zip: City-St-Zip: ENSKEDE, NA S-122 47 SE

Title: () Delete Title: ( ) Change (X) Addition

EK, JACOB RASMUS Name: Name: Address: Address: ROSENKALLAVAGEN 6 NYKOPING, NA S-611 36 SE City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DANIEL BRUCE MERRITT **MGRM** 04/28/2006