

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000033165

1. Entity Name
ENTERTAINMENT CARD SERVICES, LLC



Principal Place of Business

1400 VILLAGE SQUARE BOULEVARD
#3-SUITE 342
TALLAHASSEE, FL 32312 US

Mailing Address

1400 VILLAGE SQUARE BOULEVARD
#3-SUITE 342
TALLAHASSEE, FL 32312 US



08152006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

03-0541883

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**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]

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

(NOTE: Registered Agent signature required when reinstating)

8-15-06

DATE

Filing Fee is \$50.00
Due by September 8, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
SMITH, DAVID GLENN
1400 VILLAGE SQUARE BLVD, #3-SUITE 342
TALLAHASSEE, FL 32312

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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]

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

Date

8-15-06

Daytime Phone #

877-265-6584