2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

DOCUMENT# L04000036420

Entity Name: KINKORA PASS, LLC

Current Principal Place of Business:

C/O MACY LANE INVESTMENTS, LLC
287 BURNT PINE DRIVE
NAPLES, FL 34119

New Principal Place of Business:

C/O LAMAR COMPANIES
365 SOUTH STREET
MORRISTOWN, NJ 07960

Current Mailing Address:

C/O MACY LANE INVESTMENTS, LLC
287 BURNT PINE DRIVE
NAPLES, FL 34119

New Mailing Address:

C/O LAMAR COMPANIES
365 SOUTH STREET
MORRISTOWN, NJ 07960

FEI Number: 20-1057451 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LAMAR MANAGER, INC.,
Address: 287 BURNT PINE DRIVE
City-St-Zip: NAPLES, FL 34119

Title: MGR (X) Delete
Name: BOSS, CORY D
Address: 287 BURNT PINE DRIVE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LAMAR MANAGER, INC.,
Address: 365 SOUTH STREET
City-St-Zip: MORRISTOWN, NJ 07960

Title: ( ) Change ( ) Addition
Name:
Address:
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: CORY D. BOSS VP 04/20/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date