2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040379

Entity Name: EASYBOOKS LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1114 E. JOHN SIMS PKWY. #152 NICEVILLE, FL 32578	

Current Mailing Address:	**New Mailing Address:**
1114 E. JOHN SIMS PKWY. #152 NICEVILLE, FL 32578	

FEI Number: 27-0093204   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:**
COLEMAN, DOUG 1504 GLENLAKE CIRCLE NICEVILLE, FL 32578 US	COLEMAN, DOUGLAS J 1504 GLENLAKE CIRCLE NICEVILLE, FL 32578 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: DOUGLAS J. COLEMAN   04/21/2006

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM (X) Delete	Title:	( ) Change ( ) Addition
Name:	LISK, DAVID	Name:	
Address:	705 SAILFISH DR.	Address:	
City-St-Zip:	FORT WALTON BEACH, FL 32548	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	COLEMAN, DOUG	Name:	
Address:	1504 GLENLAKE CIRCLE	Address:	
City-St-Zip:	NICEVILLE, FL 32578	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	COLEMAN, LESLIE	Name:	
Address:	1504 GLENLAKE CIRCLE	Address:	
City-St-Zip:	NICEVILLE, FL 32578	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: DOUGLAS J. COLEMAN   MGRM   04/21/2006

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