2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041172

Entity Name: HARMONY SOUND, LLC

FILED Mar 31, 2007 Secretary of State

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

360 BEACHSIDE DRIVE 37 COMPASS POINT WAY, SOUTH #420 CARILLON BEACH, FL 32413 WATERSOUND BEACH, FL 32413

Current Mailing Address: New Mailing Address:

360 BEACHSIDE DRIVE P.O. BOX 613329

CARILLON BEACH, FL 32413 WATERSOUND BEACH, FL 32461

FEI Number: 20-1185249 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:

DANYSH, DONALD C DANYSH, DONALD C

360 BEACHSIDE DRÎVE 37 COMPASS POINT WAY, SOUTH #420 CARILLON BEACH, FL 32413 US WATERSOUND BEACH, FL 32461 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: DONALD C DANYSH 03/31/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name:DANYSH, DONALD CName:DANYSH, DONALD C MGRMAddress:360 BEACHSIDE DRIVEAddress:37 COMPASS POINT WAY, SOUTH #420City-St-Zip:CARILLON BEACH, FL 32413City-St-Zip:WATERSOUND BEACH, FL 32413

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

 Name:
 DANYSH, LINDA V
 Name:

 Address:
 360 BEACHSIDE DRIVE
 Address:

 City-St-Zip:
 CARILLON BEACH, FL 32413
 City-St-Zip:

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

 Name:
 DUPONT, DENNIS R
 Name:

 Address:
 P.O. BOX 916
 Address:

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:

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

 Name:
 DUPONT, RUTH
 Name:

 Address:
 301 3RD AVENUE SOUTH
 Address:

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:

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

 Name:
 FERNANDEZ, JOHN C
 Name:

 Address:
 909 LAFAYETTE ST. #12
 Address:

 City-St-Zip:
 NEW ORLEANS, LA 70113
 City-St-Zip:

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

 Name:
 WELLS, GREGORY C
 Name:

 Address:
 909 LAFAYETTE ST. #12
 Address:

 City-St-Zip:
 NEW ORLEANS, LA 70113
 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: DONALD C DANYSH MGRM 03/31/2007