

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041737

**FILED**  
**Apr 27, 2006**  
**Secretary of State**

**Entity Name:** SOUND EXCHANGE PROPERTY SERVICES, L.L.C.

**Current Principal Place of Business:**

2575 ULMERTON RD, STE 210  
CLEARWATER, FL 33762

**New Principal Place of Business:**

2575 ULMERTON RD  
SUITE 200  
CLEARWATER, FL 33762

**Current Mailing Address:**

2575 ULMERTON RD, STE 210  
CLEARWATER, FL 33762

**New Mailing Address:**

2575 ULMERTON RD  
SUITE 200  
CLEARWATER, FL 33762

**FEI Number:** 20-2649654

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHRS, DENIS A  
2575 ULMERTON RD, STE 210  
CLEARWATER, FL 33762 US

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

COHRS, DENIS A  
2575 ULMERTON RD  
SUITE 210  
CLEARWATER, FL 33762 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: DENIS A. COHRS

04/27/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RICCARDI, CYNTHIA  
Address: 2575 ULMERTON ROAD  
City-St-Zip: CLEARWATER, FL 33762

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RICCARDI, CYNTHIA  
Address: 2575 ULMERTON ROAD, SUITE 200  
City-St-Zip: CLEARWATER, FL 33762

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: CYNTHIA RICCARDI

MGR

04/27/2006

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