2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2006
Secretary of State

DOCUMENT# L04000042004

Entity Name: ARTISAN'S WORKSHOP, LLC

Current Principal Place of Business:

1505 W. MORRISON AVE.
TAMPA, FL 33606 US

New Principal Place of Business:

2111 N. ALBANY AVE.
TAMPA, FL 33607 US

Current Mailing Address:

1505 W. MORRISON AVE.
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 20-1338012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, CARL C
1505 W. MORRISON AVE.
TAMPA, FL 33606 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: JOHNSON, CARL C
Address: 1505 W. MORRISON AVE.
City-St-Zip: TAMPA, FL 33606 US

ADDITIONS/CHANGES:

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: CARL C. JOHNSON MGR 01/21/2006

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