## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000043309

City-St-Zip: LUTZ, FL 35589060 US

Entity Name: RAPSCALLION ENTERPRISES LLC

FILED Apr 15, 2007 Secretary of State

|   |                               | eciota ciateta 1410co, cco          |   |   |  |
|---|-------------------------------|-------------------------------------|---|---|--|
| Current Principal Place of Business:        |                               |                                     | New Principal Place of Business:            |   |  |
|   | D O' LAKES BI<br>AKES, FL 346 | <del></del>                         |   |   |  |
| Current Mailing Address:                    |                               |                                     | New Mailing Address:                        |   |  |
| 11320 CAI<br>TAMPA, F                       | RROLLWOOD<br>L 33618          | DRIVE                               |   |   |  |
| FEI Number: 81-0651915 FEI Nu               |                               | FEI Number Applied For ( )          | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )         |  |
| Name and                                    | d Address of (                | Current Registered Agent:           | Name and Address                            | Name and Address of New Registered Agent: |  |
| 11320 CAI<br>TAMPA, F                       |                               | 6                                   | purpose of changing its registere           | ed office or registered agent, or both    |  |
| SIGNATU                                     |                               |                                     |   |   |  |
|   | Electro                       | nic Signature of Registered A       | gent  | Date                                      |  |
| MANAGING MEMBERS/MANAGERS:                  |                               |                                     | ADDITIONS/CHANGES:                          | ADDITIONS/CHANGES:                        |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MORGAN, KEN                   | LLWOOD DRIVE                        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MORGAN, JAN                   | N CACOON PLACE                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:                             | MORGAN, SHA                   | ) Delete<br>IEL C<br>N CACOONEL ACE | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                   |  |

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.

City-St-Zip:

SIGNATURE: KENNETH D. MORGAN MGR 04/15/2007