2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066069

Entity Name: C-ME, LLC

FILED Aug 04, 2006 Secretary of State

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

15630 OCEAN WALK CIRCLE 4609 LAMBERT PLACE #303 ALEXANDRIA, VA 22206

FORT MYERS, FL 33908

Current Mailing Address: New Mailing Address:

4809 LAMBERT PLACE
ALEXANDRIA, VA 22311

4609 LAMBERT PLACE
ALEXANDRIA, VA 22311

FEI Number: 20-1640481 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SMITH, WILLIAM R 8191 COLLEGE PARKWAY #204 FORT MYERS, FL 33919 US

MANAGING MEMBERS/MANAGERS:

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

Electronic eignature of registered /

ADDITIONS/CHANGES:

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

 Name:
 ASH, MONICA M M
 Name:
 ASH, MONICA M M

 Address:
 4809 LAMBERT PLACE
 Address:
 4609 LAMBERT PLACE

 City-St-Zip:
 ALEXANDRIA, VA 22311
 City-St-Zip:
 ALEXANDRIA, VA 22311

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

Name: ASH, ERIC J Name: ASH, ERIC J

Address: 4809 LAMBERT PLACE Address: 4609 LAMBERT PLACE
City-St-Zip: ALEXANDRIA, VA 22311 City-St-Zip: ALEXANDRIA, VA 22311

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

 Name:
 JENNINGS, CHRISTINE E
 Name:

 Address:
 8751 WESLEYAN DRIVE, #1817
 Address:

 City-St-Zip:
 FORT MYERS, FL 33919
 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: MONICA ASH COO 08/04/2006