

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069418

Entity Name: SIGNAL DIGITAL VENTURES, LLC

FILED  
May 24, 2006  
Secretary of State

## Current Principal Place of Business:

620 DOUGLAS AVE.  
SUITE 1306  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

542 DOUGLAS AVENUE  
ALTAMONTE SPRINGS, FL 32714

## Current Mailing Address:

P.O. BOX 917251  
LONGWOOD, FL 32791

## New Mailing Address:

FEI Number: 71-0971838      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

PRUTSMAN, JEFFREY D  
620 DOUGLAS AVE.  
SUITE 1306  
ALTAMONTE SPRINGS, FL 32714 US

## Name and Address of New Registered Agent:

PRUTSMAN, JEFFREY D  
542 DOUGLAS AVENUE  
ALTAMONTE SPRINGS, FL 32714 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:

05/24/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HEISEKE, FREDRICK  
Address: 2826 SPYGLASS COVE  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HEISEKE, FREDRICK E  
Address: 2826 SPYGLASS COVE  
City-St-Zip: LONGWOOD, FL 32779

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: FREDRICK E HEISEKE

MGRM

05/24/2006

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