2007 LIMITED LIABILITY COMPANY

ANNUAL REPORT **FILED** Feb 26, 2007 08:00 AM Secretary of State **DOCUMENT # L04000073230** CHILDS HOLDINGS I, LLC Principal Place of Business Mailing Address 11971 ROSEMOUNT DRIVE 11971 ROSEMOUNT DRIVE FORT MYERS, FL 33913 FORT MYERS, FL 33913 02222007 No Chq-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1800451 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CURCIONE, MICHELLE A DO NOT WRITE 11971 ROSEMOUNT DRIVE FORT MYERS, FL 33913 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 U00000648771 9. MANAGING MEMBERS/MANAGERS MGR TITLE CURCIONE, MICHELLE A NAME STREET ADDRESS 11971 ROSEMOUNT DRIVE CITY-ST-ZIP FORT MYERS, FL 33913 NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>MUHULU</u> ACULURU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP

420/07 (239)225-9292