2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076327

Address:

City-St-Zip:

450 STATE ROAD 13 N. SUITE 106-131

JACKSONVILLE, FL 32259

Entity Name: PILLAR CONCEPTS, LLC

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 450 STATE ROAD 13 NORTH SUITE 106-131 JACKSONVILLE, FL 32259 **Current Mailing Address: New Mailing Address:** 450 STATE ROAD 13 NORTH SUITE 106-131 JACKSONVILLE, FL 32259 FEI Number: 34-2020921 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: SCHUSTER, JAMI L 450 STATE ROAD 13 NORTH SUITE 106-131 JACKSONVILLE, FL 32259 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete MGRM Title: () Change () Addition SCHUSTER, JAMI L PRES Name: Name: Address: 450 STATE ROAD 13 N, SUITE 106-131 Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: Title: MGM () Delete Title: () Change () Addition Name: WIGGINS, TREVOR H ADVISOR 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: JAMI SCHUSTER MANA 05/01/2006