## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L04000077579

1. Entity Name POWER ON, LLC



FILED Feb 01, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

7969 GLENARBOR COURT TALLAHASSEE, FL 32309 7969 GLENARBOR COURT TALLAHASSEE, FL 32309



01232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1811605

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CUNNIFF, JOHN R 7969 GLENARBOR COURT TALLAHASSEE, FL 32309

## DO NOT WRITE IN THIS SPACE

IALLAHA	55ee, FL 32309	IN.	THIS SPACE
	named entity submits this statement for the purpose of chailtions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2006		1
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CUNNIFF, JOHN R 7969 GLENARBOR CT TALLAHASSEE, FL 32309	······································	000000413557 02/10/06-80092-022 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE			

11. Thereby 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:

NAME STREET ADDRESS CITY-ST-ZIP

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

1/31/06

(850) 422-2232

Daytime Prone #