## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000087809

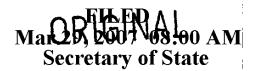
Entity Name
NED DAVIS MEDIA LLC



Principal Place of Business

18 RIO VISTA DRIVE TEQUESTA, FL 33469 Mailing Address

18 RIO VISTA DRIVE TEQUESTA, FL 33469





DO NOT WRITE IN THIS SPACE

03072007 No Chg-LLC

CR2E083 (11/05)

 FEI Number 20-1570262 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, EDWIN A 18 RIO VISTA DRIVE TEQUESTA, FL 33469

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee Is \$50.00 Due by May 1, 2007 U00000683369 04/05/07-80043-005 50.00

9. MANAGING MEMBERS/MANAGERS MGR TITLE DAVIS, EDWIN A NAME 18 RIO VISTA DRIVE STREET ADDRESS CITY-ST-ZIP TEQUESTA, FL 33469 TETLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-7/P

## DO NOT WRITE IN THIS SPACE

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 of trustee/empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

Daylime Phone #