

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090251

Entity Name: FRANCHISERESALES.COM, LLC

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

2725 SIESTA DRIVE  
SARASOTA, FL 34239

## New Principal Place of Business:

4837 SWIFT ROAD SUITE 200  
SARASOTA, FL 34239

## Current Mailing Address:

2725 SIESTA DRIVE  
SARASOTA, FL 34239

## New Mailing Address:

4837 SWIFT ROAD SUITE 200  
SARASOTA, FL 34239

FEI Number: 20-2019273      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:

BIRKHOLD, CINDY  
22 GOODRICH AVE  
SARASOTA, FL 34239      US

## Name and Address of New Registered Agent:

BIRKHOLD, CINDY  
512 N ORANGE AVE  
SARASOTA, FL 34239      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: CINDY BIRKHOLD

05/01/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: SOURCE FIRST, INC.,  
Address: 2725 SIESTA DRIVE  
City-St-Zip: SARASOTA, FL 34239

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change      ( ) Addition  
Name: SOURCE FIRST, INC.,  
Address: 4837 SWIFT ROAD SUITE 200  
City-St-Zip: SARASOTA, FL 34239

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: NANCY ESTEP

MGR

05/01/2006

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