2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# L05000007622

Entity Name: WILDFIRE, LLC

Current Principal Place of Business:

6106 JASMINE VINE DRIVE
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

6106 JASMINE VINE DRIVE
PORT ORANGE, FL 32128

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANGFORD, KENYON
6106 JASMINE VINE DRIVE
PORT ORANGE, FL 32128 US

Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete
Name: LANGFORD, KENYON
Address: 6106 JASMINE VINE DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: MGRM ( ) Delete
Name: NOBLE, SARAH
Address: 1648 TAYLOR ROAD, BOX 234
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: NOBLE, SARAH
Address: 182 COLEMAN ST
City-St-Zip: EDGEWATER, FL 32141

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: KENYON LANGFORD MGR 02/15/2006

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