

# 2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000015496

**FILED**  
**Apr 29, 2006**  
**Secretary of State**

**Entity Name:** EXPLORE FLORIDA EXCHANGE, LLC

**Current Principal Place of Business:**

120 RIVER LANDING DR  
ST. AUGUSTINE, FL 32090

**New Principal Place of Business:**

120 RIVER LANDING DR  
ST. AUGUSTINE, FL 32095

**Current Mailing Address:**

120 RIVER LANDING DR  
ST. AUGUSTINE, FL 32090

**New Mailing Address:**

120 RIVER LANDING DR  
ST. AUGUSTINE, FL 32095

**FEI Number:** 52-2452414

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LORE, OLGA  
120 RIVER LANDING DR  
ST. AUGUSTINE, FL 32090 US

**Name and Address of New Registered Agent:**

LORE, OLGA  
120 RIVER LANDING DR  
ST. AUGUSTINE, FL 32095 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:**

04/29/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: LORE, LAJOS  
Address: 120 RIVER LANDING DR  
City-St-Zip: ST. AUGUSTINE, FL 32090

Title: MGR ( ) Delete  
Name: CHIARAMONTE, VERA  
Address: 1140 N. BREVARD STREET  
City-St-Zip: ST AUGUSTINE, FL 32084

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: LORE, LAJOS  
Address: 120 RIVER LANDING DR  
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: MGR (X) Change ( ) Addition  
Name: MAIER, JANOS  
Address: 64 WASHINGTON STR  
City-St-Zip: ST AUGUSTINE, FL 32080

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:** LAJOS LORE

P

04/29/2006

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