2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 20, 2006 8:00 am **Secretary of State** DOCUMENT # L05000020166 01-23-2006 90141 006 ****50.00 1. Entity Name PLAN A VENTURES, LLC Principal Place of Business Malling Address 14201 BANBURY WAY 14201 BANBURY WAY TAMPA, FL 33624 TAMPA FL 33624 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 01132006 Chg-LLC CR2E083 (11/05) City & State City & State Applied For Not Applicable Country Country \$5.00 Additional Fee Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JAMES, GEORGE R Street Address (P.O. Box Number is Not Acceptable) 4230 S. MACDILL AVE. **SUITE K** TAMPA, FL 33611 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or puried name of requisered agent and title if applicable (NOTE: Registered Agent signature required when rematating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES TITLE MGRM ☐ Delete TITLE Addition L'HEUREUX, LARRY NAME MAJE STREET ASSORESS 14201 BANBURY WAY STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TAMPA, FL 33824 TITLE Octor 101 F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-72P CITY-ST-ZP IUITE ☐ Detete IIII F ☐ Addition NAME KAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$1-21P TITLE O Delete TILLE Addition KAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUA-21- VS MILE Delete TETS F Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-IP CITY-ST-DP TITLE Deleta TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CXTY-SI-ZIP

11. Thereby certify that the information supplied with this filling 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 eath; 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.

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2006

PLAN A VENTURES, LLC 14201 BANBURY WAY TAMPA, FL 33624

Subject: PLAN A VENTURES, LLC

Reference Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

05000020166

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE ANNUAL REPORTS SECTION