2007 LIMITED LIABILITY COMPANY

SIGNATURE: \(\)

Jan 31, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # L05000023814 01-31-2007 90087 039 ****50.00 HALLIN FAMILY LLC Principal Place of Business Mailing Address 7298 VILLA D'ESTE DRIVE 7298 VILLA D'ESTE DRIVE SARASOTA, FL 34238 US SARASOTA, FL 34238 US 01222007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2694677 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HALLIN, PHYLLIS E TTEE DO NOT WRITE 7298 VILLA D'ESTE DR SARASOTA, FL 34238 IN THIS SPACE 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 MANAGING MEMBERS/MANAGERS 9. TITLE HALLIN, PHYLLIS E NAME STREET ADDRESS 7298 VILLA D'ESTE DRIVE CITY-ST-ZIP SARASOTA, FL 34238 MGMR TITLE Eric Hallin NAME 5040 Mimora Road STREET ADDRESS CITY-ST-ZIP Ventce , FL 34293 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-\$T-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NG MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED