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L05000047566

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000047566

1. Entity Name
OTM, L.L.C.

Principal Place of Business	Mailing Address
1117 BEACHWATER ROAD AMELIA ISLAND, FL 32034	2022 COUNTRY RIDGE ROAD BIRMINGHAM, AL 35243

01182006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business	3. Mailing Address
1117 Beach Walker Rd.	2022 Country Ridge Place
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Amelia Island FL	City & State: Birmingham AL
Zip: 32034 Country: USA	Zip: 35243 Country: USA

4. FEI Number: 252-78-9980 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name: Shelby E. Daniels
Street Address (P.O. Box Number is Not Acceptable): 1920 E. Blount St.
City: Pensacola FL Zip Code: 32503

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] 2-3-06
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, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGRM NAME: Mark W. Edwards II STREET ADDRESS: 2022 Country Ridge Place CITY-ST-ZIP: Birmingham, AL 35243	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Mark W. Edwards 1-18-06 (205) 581-9427
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #