2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000050952 Secretary of State 1. Entity Name 01-17-2006 90055 038 ****50.00 WBC106, LLC Principal Place of Business Mailing Address 101631 OVERSEAS HIGHWAY P.O. BOX 1091 KEY LARGO, FL 33037 KEY LARGO, FL 33037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102006 Chg-LLC CR2E083 (11/05) 4 FEI Number 20-2967541 City & State City & State Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEBB, EDWARD G Street Address (P.O. Box Number is Not Acceptable) 101631 OVERSEAS HIGHWAY KEY LARGO, FL 33037 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10 TITLE MGRM TITLE ■ Addition ☐ Delete ☐ Change WEBB, EDWARD G NAME NAME STREET ADDRESS P.O. BOX 1091 STREET ADDRESS CITY-ST-ZIP KEY LARGO, FL 33037 CITY-ST-ZIP MGRM TITLE Delete TITLE ☐ Change ☐ Addition WEBB, DONNA R STREET ADDRESS P.O. BOX 1091 STREET ADDRESS CITY-ST-ZIP KEY LARGO, FL 33037 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

FILED

Jan 17, 2006 8:00 am