## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000055839

Entity Name: FULLHOUSE LLC

City-St-Zip:

SANTA CRUZ, CA 95065

FILED Apr 11, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 749 OAKHILL RD APTOS, CA 95003 **Current Mailing Address: New Mailing Address:** 749 OAKHILL RD APTOS, CA 95003 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROBINSON, MARILE 1264 WILLOW DR WESTON, FL 33326 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: ( ) Delete MGR Title: () Change () Addition ROBINSON, MARILE Name: Name: Address: 749 OAKHILL RD. Address: City-St-Zip: APTOS, CA 95003 City-St-Zip: Title: MGR () Delete Title: () Change () Addition GOODNIGHT, KATE Name: Name: Address: 617 TREVETHAN AVE. Address: City-St-Zip: SANTA CRUZ, CA 95065 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CURTIS, CATHY Name: Name: 617 TREVETHAN AVE. Address: Address:

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.

City-St-Zip:

SIGNATURE: MARILE ROBINSON MGR 04/11/2006