

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058091

FILED
Apr 21, 2006
Secretary of State

Entity Name: ALTERNATIVE CONCEPTS, L.L.C.

Current Principal Place of Business:

24 WEST CHASE STREET
PENSACOLA, FL 32502

New Principal Place of Business:

4051 BARRANCAS AVENUE, SUITE #G270
PENSACOLA, FL 32501

Current Mailing Address:

24 WEST CHASE STREET
PENSACOLA, FL 32502

New Mailing Address:

4051 BARRANCAS AVENUE, SUITE #G270
PENSACOLA, FL 32501

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THAMES & FRAZIER, P.A.
24 WEST CHASE STREET
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

BORDELON & SCHULTZ LAW FIRM, P.L.
2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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: KERRY ANNE SCHULTZ, ESQUIRE

04/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: WEISEL, CHRISTOPHER M
Address: 4051 BARRANCAS AVENUE, SUITE #G270
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM () Change (X) Addition
Name: SCHURRER, LOUIS S
Address: 407 ALBA
City-St-Zip: PENSACOLA, FL 32507

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.

SIGNATURE: LOUIS L. SCHURRER

MGRM

04/21/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date