2006 LIMITED LIABILITY COMPANY

Jun 29, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # L05000060301 05-03-2006 90026 042 ****50.00 RAGTIME GROUP, LLC Mailing Address Principal Place of Business 30011363 99 SOUTH ALCANIZ STREET STE A 99 SOUTH ALCANIZ STREET STE A PENSACOLA, FL 32502 PENSACOLA, FL 32502 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06272006 Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For City & State City & State 20-2968956 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HOLMES, ROBERT G Street Address (P.O. Box Number is Not Acceptable) 99 SOUTH ALCANIZ STREET STE A PENSACOLA, FL 32502 Zip Code City FL 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) Filing Fee is \$50.00 Due by September 6, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. ROBERT G. HOLMES Delete 99 S. ALCANIZ ST., STE. A Change ■ Addition TITLE TITLE NAME PENSACOLA, FL 32502 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MANAGING MEMBER TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Detete TITLE ☐ Change TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: 4 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-7IP

6-27-06

850-444-9800 Daytime Phone #

FILED

ATTACHMENT HOLMES & COMPANY, P.A. CERTIFIED PUBLIC ACCOUNTANTS

30011363

ROBERT G. HOLMES, C.P.A.

JOYCE E. KINTER, C.P.A.

JESSICA H. BEAL, C.P.A.

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MEMBERS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

June 27, 2006

Florida Department of State Division of Corporations Annual Reports Section Post Office Box 6478 Tallahassee, Florida 32314

Re: Ragtime Group, LLC Document L05000060301

Dear Sir or Madam:

The above entity is in receipt of the enclosed letter and copy of originally filed Annual Report.

Further enclosed is a corrected Annual Report with the requested information.

Please advise what other information might be required in this regard.

We apologize for the error in our original submission.

Yours truly,

Robert G. Holmes

RGH/cmd

Enclosures