2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

SIGNATURE:

Jul 13, 2006 8:00 am DOCUMENT # L05000065432 **Secretary of State** 1. Entity Name 07-13-2006 90079 005 ****50.00 JOSHUA R. BIRDWELL, LLC 🗽 Principal Place of Business Mailing Address PO BOX 651282 VERO BEACH FL 32965 1805 19TH PLACE VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address 1901 INDIAN RIVER BLVD Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) UNIT E210 City & State City & State 4. FEI Number Applied For 20-3118329 Not Applicable VERO BEACH Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 32960 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BIRDWELL, JOSHUA R Street Address (P.O. Box Number is Not Acceptable) 1901 INDIAN RIVER BLVD 1805 19TH PLACE VERO BEACH FL 32960 UNIT E210 Zip Code 32960 VERO BEACH 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 regi SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. TITLE TITLE PD Delete [] Change ☐ Addition NAME NAME JOSHUA R BIRDWELL STREET ADDRESS STREET ADDRESS 1901 INDIAN RIVER BLVD E210 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH THTLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NÂME 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 Section 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.

MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

JOSHUA R BIRDWELL PRES 4/11/06 772-633-2962

Daytime Phone #

Date