

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065812

FILED
Apr 28, 2006
Secretary of State

Entity Name: TRAVELING CARNIES LLC

Current Principal Place of Business:

4430 SANDHURST DRIVE
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

10110 EASTERN LAKE AVE
#201
ORLANDO, FL 32817

New Mailing Address:

FEI Number: 56-2577983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTTI, ANTHONY J
10110 EASTERN LAKE AVE
#201
ORLANDO, FL FL US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: PASTORE, TODD A
Address: 4430 SANDHURST DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM () Delete
Name: GLASS, JOE E
Address: 4430 SANDHURST DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM () Delete
Name: SICKER, HANS C
Address: 4430 SANDHURST DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM () Delete
Name: OLSON, CHRISTOPHER C
Address: 4430 SANDHURST DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: MGRM () Delete
Name: SCOTTI, JOSEPH M
Address: 10110 EASTERN LAKE AVE #201
City-St-Zip: ORLANDO, FL 32817

Title: MGRM () Delete
Name: SCOTTI, ANTHONY J
Address: 10110 EASTERN LAKE AVE #201
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTHONY J SCOTTI

MGRM

04/28/2006

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