2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072866

City-St-Zip:

Entity Name: ASPIRING SOLUTIONS, LLC

FILED Jul 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 504 WYMORE ROAD 125 SOUTH SWOOPE AVENUE WINTER PARK, FL 32789 213 MAITLAND, FL 32751 **Current Mailing Address:** New Mailing Address: 504 WYMORE ROAD 125 SOUTH SWOOPE AVENUE WINTER PARK, FL 32789 MAITLAND, FL 32751 FEI Number: 33-1122170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CRONEN, JOHN GAUKEL, BRADLEY 125 SOUTH SWOOPE AVENUE 307 BURLEIGH COURT WINTER SPRINGS, FL 32708 US MAITLAND, FL 32751 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: BRADLEY GAUKEL 07/05/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CRONEN, JOHN Name: Name: 307 BURLEIGH COURT Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GAUKEL, BRADLEY Name: Name: Address: 911 TORREY PINE DRIVE Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ADAMS, SCOTT Name: Name: 8727 HARBOR VIEW DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip: Title: () Delete Title: MGRM () Change (X) Addition Name: Name: ADAMS, CATHY 8727 HARBOR VIEW DRIVE Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32817 Title: () Delete Title: MGRM () Change (X) Addition CRONEN, JULIE Name: Name: 307 BURLEIGH COURT 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:

WINTER SPRINGS, FL 32708

SIGNATURE: BRADLEY GAUKEL MGRM 07/05/2006