

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075430

FILED  
Aug 24, 2006  
Secretary of State

Entity Name: TRUEVISION PROPERTIES, L.L.C.

**Current Principal Place of Business:**

7378 WINDING LAKE CIRCLE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

7378 WINDING LAKE CIRCLE  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 20-3612577      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

REISS, JARED P  
7378 WINDING LAKE CIRCLE  
OVIEDO, FL 32765      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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: REISS, JARED P PRESIDE  
Address: 7378 WINDING LAKE CIRCLE  
City-St-Zip: OVIEDO, FL 32765

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: JARED P. REISS

PRES

08/24/2006

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