

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075546

Entity Name: CEDARSOUND, LLC

FILED  
Apr 17, 2007  
Secretary of State

## Current Principal Place of Business:

148 MIRACLE STRIP PKWY, SE, SUITE 2  
FT. WALTON BEACH, FL 32548

## New Principal Place of Business:

148 MIRACLE STRIP PKWY, SE  
SUITE 2  
FORT WALTON BEACH, FL 32548

## Current Mailing Address:

148 MIRACLE STRIP PKWY, SE, SUITE 2  
FT. WALTON BEACH, FL 32548

## New Mailing Address:

148 MIRACLE STRIP PKWY, SE  
SUITE 2  
FORT WALTON BEACH, FL 32548

FEI Number: 34-2053144

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FISHER, DEBORAH S  
148 MIRACLE STRIP PKWY, SE, SUITE 2  
FT. WALTON BEACH, FL 32548 US

## Name and Address of New Registered Agent:

FISHER, DEBORAH S  
148 MIRACLE STRIP PKWY, SE  
SUITE 2  
FORT WALTON BEACH, FL 32548 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: DEBORAH S. FISHER

04/17/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FISHER, DEBORAH S  
Address: 602 PELHAM ROAD  
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: MGRM ( ) Delete  
Name: FISHER, J. MARK  
Address: 602 PELHAM ROAD  
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: MGRM ( ) Delete  
Name: BAGWELL, DAVID A  
Address: 10937 BOCA POINTE DRIVE  
City-St-Zip: ORLANDO, FL 32836

Title: MGRM ( ) Delete  
Name: BAGWELL, ELIZABETH C  
Address: 10937 BOCA POINTE DRIVE  
City-St-Zip: ORLANDO, FL 32836

## 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  
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: DEBORAH S. FISHER

MGRM

04/17/2007

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