2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076554

Entity Name: AMRAK INVESTMENTS, LLC

FILED Aug 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O FOLEY & LARDNER LLP/ATTN: R.J. WOLFE 100 N. TAMPA STREET, SUITE 2700 TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

C/O FOLEY & LARDNER LLP/ATTN: R.J. WOLFE C/O FOLEY & LARDNER LLP/ATTN: R.J. WOLFE 100 N. TAMPA STREET, SUITE 2700 POST OFFICE BOX 3391 TAMPA, FL 33601 TAMPA, FL 33602

FEI Number: 20-3260508 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:

F & L CORP F & L CORP

ONE INDEPENDENT DRIVE, SUITE 1300 ONE INDEPENDENT DRIVE, SUITE 1300 JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

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: RANDOLPH J WOLFE VICE PRESIDENT 08/05/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete

CHRYSOCHOOS, JACQUES Name: Name: 100 N. TAMPA STREET, SUITE 2700 Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

SONNENSCHEIN, THOMAS F Name: Name: Address: 100 N. TAMPA STREET, SUITE 2700 Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

OAKLAND, CHRISTINE Name: Name: 100 N. TAMPA STREET, SUITE 2700 Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: STIERS, KIMBERLY N Name: Address: 100 N. TAMPA STREET, SUITE 2700 Address: City-St-Zip: TAMPA, FL 33602 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: THOMAS F. SONNENSCHEIN 08/05/2006