2007 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Jan 30, 2007 08:00 AM DOCUMENT # L05000093686 **Secretary of State** 1. Entity Name LBS-I, LLC Principal Place of Business Mailing Address **4850 DOCKSIDE DRIVE 4850 DOCKSIDE DRIVE** SUITE 103 SUITE 103 FT. MYERS, FL 33919 FT. MYERS, FL 33919 01232007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3525378 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HUDOBA, STEPHEN M DO NOT WRITE 101 EAST KENNEDY BOULEVARD **SUITE 3700** IN THIS SPACE TAMPA, FL 33602 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed neme of registered agent and title if applicable. (NOTE, Registered Agent signsture required when registered) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS MGR JWS, INC. II MAME STREET ADDRESS 4850 DOCKSIDE DRIVE, SUITE 103 FT. MYERS, FL 33919 CITY-ST-ZIP MARKE STREET ADDRESS U00000611528 02/02/07-80067-004 50.00 CITY-51-719 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TIBE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Fforida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

Pris Jury W Severium and Member, or authorized representative 27 JAN 07 239-481-0418 Daytime Phone #

TITLE NAME STREET ADDRESS CITY-ST-ZP