

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101824

FILED  
May 17, 2006  
Secretary of State

Entity Name: ALL ABOUT SCOOTERS LLC

**Current Principal Place of Business:**

2312 APALACHEE PKWY. #10  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

2312 APALACHEE PKWY. #10  
TALLAHASSEE, FL 32301

**New Mailing Address:**

FEI Number: 76-0802925      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:**

SMITH, LEROY E  
2312 APALACHEE PKWY. #10  
TALLAHASSEE, FL 32301      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: MGRM ( ) Delete  
Name: SMITH, LEROY E  
Address: 2312 APALACHEE PKWY. #10  
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM ( ) Delete  
Name: SMITH, SUSAN D  
Address: 2312 APALACHEE PKWY. #10  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES:**

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: SMITH, LEROY E.

MGRM

05/17/2006

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