2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 14, 2006 8:00 am **Secretary of State DOCUMENT # L05000105401** 1. Entity Name BILLY TAYLOR INITIATIVES, LLC 03-14-2006 90204 045 ****50.00 Principal Place of Business Mailing Address 3821 PICKWICK DRIVE 3821 PICKWICK DRIVE ORLANDO, FL 32817 US ORLANDO, FL 32817 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 02012006 Chg-LLC CR2E083 (11/05) 4 FEI Namber 20 ~ 3725773 Applied For Çity & State City & State Not Applicable Country \$5.00 Additional Country Zip 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEGAL ZOOM NEVADA, INC. Street Address (P.O. Box Number is Not Acceptable) 44 W. FLAGLER STREET **SUITE 675 MIAMI, FL 33130** Zip Code City FL 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 news of registered agent and title if applicable. (NOTE: Registered Agent algorithm required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM TITLE TITLE ☐ Change Addition ☐ Delicie TAYLOR, WILLIAM L JR. MALG NAME 3821 PICKWICK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32817 CITY-ST-ZIP TINE ■ Addition ☐ Detete TILE ☐ Change NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CETY-ST-74P ☐ Delete TIRE TILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZEP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete MLE ☐ Change NAME MALES STREET ACCRESS STREET ADDRESS CITY-ST-ZEP CITY-ST-ZP ME Deteta TITLE Chaque ☐ AddItion NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-7P TITLE ☐ Addition TILE ☐ Change ☐ Delete NAME NAAF STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZP 11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida 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.

WILLIAM L. TAYLOR JR, 3.7.06
GER, OR AUTHORIZED REPRESENTATIVE

907.671.7379

FILED