2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 15, 2006 8:00 am
Secretary of State
07-11-2006 90119 027 ****50.00

DOCUMENT # L05000108599

1. Entity Name
ALEXANDRIA'S ARTIST CO-OP LLC

Principal Place of Business	Mailing Address
2149 COLLIER PARKWAY LAND O LAKES, FL 34639	2149 COLLIER PARKWAY LAND O LAKES, FL 34639

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

01042006 Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3759742 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BONK, PETER A 1837 LAKE HERON DR. LUTZ, FL 33549	Name DAVID THOMPSON Street Address (P.O. Box Number is Not Acceptable) 7544 BERNA LANE City LAND O LAKES FL Zip Code 34637

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 DAVID THOMPSON 7/6/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00 Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BONK, PETER A 1837 LAKE HERON DR. LUTZ, FL 33549	☐ Delete	PRESIDENT BONK, PETER 1837 LAKE HERON DR LUTZ FL 33549	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR THOMPSON, DAVE 754 BERNA LANE LAND O LAKES, FL 34639	☐ Delete	TREASURER DAVID THOMPSON 7544 BERNA LANE LAND O LAKES FL 34637	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~MGR~~ SECRETARY DURHAM, KATHLEEN 6440 WISTERIA LOOP LAND O LAKES, FL 34639	☐ Delete	SECRETARY DURHAM, KATHLEEN 6440 WISTERIA LOOP LAND O LAKES, FL 34639	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT	☐ Delete	VICE PRESIDENT JASON HANN 3756 LOCKRIDGE DR LAND O LAKES 34638	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DIRECTOR JUDY BINIASZ 7556 BERNA LANE LAND O LAKES, FL 34637	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: DAVID THOMPSON 4/27/06 813-996-4477
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #