

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 14, 2006  
Secretary of State**

DOCUMENT# L05000118608

Entity Name: FOUR STRINGS, LLC

**Current Principal Place of Business:**

843 LOGGERHEAD ISLAND DRIVE  
SATELLITE BCH, FL 32937

**New Principal Place of Business:**

**Current Mailing Address:**

843 LOGGERHEAD ISLAND DRIVE  
SATELLITE BCH, FL 32937

**New Mailing Address:**

FEI Number: 20-4028703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FALLACE, JAMES H  
FALLACE & LARKIN, L.C.  
1900 S. HICKORY STREET, STE. A  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

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: MCTAMMANY, ZAHRA  
Address: 843 LOGGERHEAD ISLAND DRIVE  
City-St-Zip: SATELLITE BCH, FL 32937

**ADDITIONS/CHANGES:**

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: ZAHRA Y. MCTAMMANY

MGRM

04/14/2006

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