2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119328

Entity Name: BITBURGER HOLDINGS, L.L.C.

FILED May 01, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1112 HOSPITAL ROAD 4504 HWY 20 EAST

SUITE B

FORT WALTON BEACH, FL 32547 NICEVILLE, FL 32578

New Mailing Address: Current Mailing Address:

907 JASON DRIVE 1112 HOSPITAL ROAD NICEVILLE, FL 32578

FORT WALTON BEACH, FL 32547

FEI Number: 04-3836462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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:

FOSTER, WILLIAM S 909 MAR WALT DRIVE 1014

FORT WALTON BEACH, FL 32547 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:

ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete FREUDENBERGER, KEITH FREUDENBERGER, KEITH Name: Name: Address: 1112 HOSPITAL ROAD, SUITE B Address: 907 JASON DRIVE City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: NICEVILLE, FL 32578

Title: MGRM () Delete Title: MGRM (X) Change () Addition FREUDENBERGER, TAMMIE K Name: FREUDENBERGER, TAMMIE K Name: Address: 1112 HOSPITAL ROAD, SUITE B Address: 907 JASON DRIVE City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: NICEVILLE, FL 32578

Title: MGRM () Delete Title: MGRM (X) Change () Addition

DRESSEN, DIRK Name: DRESSEN, DIRK Name:

1112 HOSPITAL ROAD, SUITE B 4504 HWY 20 EAST, SUITE B Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: NICEVILLE, FL 32578

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: TAMMIE FREUDENBERGER **MGRM** 05/01/2006