

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122065

FILED
Feb 02, 2006
Secretary of State

Entity Name: J P TEAPOT SCENIC DESIGNS LLC

Current Principal Place of Business:

1421 SE 34TH TERRACE
CAPE CORAL, FL 33904

New Principal Place of Business:

New Mailing Address:

375 ERICKSEN AVE.
222
BAINBRIDGE ISLAND, WA 98110

Current Mailing Address:

1421 SE 34TH TERRACE
CAPE CORAL, FL 33904

FEI Number: 20-3987611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., STE. 101
TALLAHASSEE, FL 323012960 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: DUPUREUR, JAMES M
Address: PO BOX 249
City-St-Zip: PAGO PAGO, AS 96799

Title: MS () Change (X) Addition
Name: QUINN, KELLY J
Address: 375 ERICKSEN AVE., SUITE 222
City-St-Zip: BAINBRIDGE ISLAND, WA 98110

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: JAMES M. DUPUREUR MR 02/02/2006

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