2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000339

Entity Name: P.S. SOUTH & COMPANY, LC

FILED Sep 05, 2006 Secretary of State

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

5470 E. BUSCH BLVD. 11849 WILDEFLOWER PLACE SUITE 139 TEMPLE TERRACE, FL 33617 US

TEMPLE TERRACE, FL 33617 US

Current Mailing Address: New Mailing Address:

5470 E. BUSCH BLVD. SUITE 139

TEMPLE TERRACE, FL 33617 US

FEI Number: 20-3991063 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:

BOLDEN, DARRYL J
1302 E. WILDER AVE.
TAMPA, FL 33603 US

BOLDEN, DARRYL J
11849 WILDEFLOWER PLACE
TEMPLE TERRACE, FL 33617 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: 09/05/2006

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

TAMPA, FL 33603 US

City-St-Zip:

MANAGING MEMBERS/MANAGERS:

TAMPA, FL TAMPA FL

City-St-Zip:

MGRM Title: () Delete (X) Change () Addition BOLDEN, DARRYL J Name: Name: BOLDEN, DARRYL J 1302 E. WILDER AVE. Address: 11849 WILDEFLOWER PLACE Address: City-St-Zip: TAMPA, FL 33603 US City-St-Zip: TAMPA, FL 33617 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MAXWELL-SAMUEL, DEBRA D Name: MAXWELL-SAMUEL, DEBRA D Address: 1302 E. WILDER AVE. Address: 1302 E. WILDER AVE.

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

 Name:
 MAXWELL, FREDRICK O JR.
 Name:

 Address:
 1302 E. WILDER AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 33603 US
 City-St-Zip:

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

 Name:
 MAXWELL, JONATHAN A
 Name:

 Address:
 1302 E. WILDER AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 33603 US
 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: DARRYL J. BOLDEN MGRM 09/05/2006