2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

May 22, 2008 8:00 am Secretary of State 05-22-2008 90516 016 ***277.50 DOCUMENT # L06000029358 MASTER WORKS LTD. CO. Principal Place of Business Mailing Address 60043911 38200 DEERWOODS DRIVE 38200 DEERWOODS DRIVE EUSTIS, FL 32736 US EUSTIS, FL 32736 US 04252008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number 20-4530402 Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MASTERS, JOHN P DO NOT WRITE 38200 DEERWOODS DRIVE EUSTIS, FL 32736 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE MASTERS, JOHN P. NAME STREET ADDRESS 38200 DEERWOODS DRIVE EUSTIS, FL 32736 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET DORESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 of trusteepempowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATUSE AND TYPED MINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED