


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 01, 2007 8:00 am**  
**Secretary of State**

05-07-2007 90379 041 \*\*\*\*55.00  
05-03-2007 90261 041 \*\*\*\*50.00

DOCUMENT # L06000032862																																																												
<b>1. Entity Name</b> SO MANY GUITARS, LLC																																																												
<b>Principal Place of Business</b> 1623 KENILWORTH ST SARASOTA, FL 34231			<b>Mailing Address</b> 1623 KENILWORTH ST SARASOTA, FL 34231																																																									
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>																																																										
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																										
City & State		City & State		<b>4. FEI Number</b> 20-4628428																																																								
Zip		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>																																																								
<b>6. Name and Address of Current Registered Agent</b>  HOUGH, ELIOT J 1623 KENILWORTH ST SARASOTA, FL 34231			<b>7. Name and Address of New Registered Agent</b> Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____																																																									
<b>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.</b>																																																												
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																																																												
<b>Filing Fee is \$50.00 Due by September 14, 2007</b>		<b>Make check payable to Florida Department of State</b>																																																										
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>																																																									
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<b>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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.</b>																																																												
<b>SIGNATURE:</b> _____ <span style="float: right;">5/1/07 9415389195</span>																																																												
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE _____ Date _____ Daytime Phone # _____																																																												