2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 31, 2007
Secretary of State

DOCUMENT# L06000039131

Entity Name: GOING ALL IN, LLC

Current Principal Place of Business:

4866 GANDY BLVD
TAMPA, FL 33611

New Principal Place of Business:

4215 WEST MORRISON AVENUE
TAMPA, FL 33609

Current Mailing Address:

4866 GANDY BLVD
TAMPA, FL 33611

New Mailing Address:

4215 WEST MORRISON AVENUE
TAMPA, FL 33609

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PODOLSKY, WILLIAM J III,ESQ
3003 WEST AZEELE ST.
SUITE 200
TAMPA, FL 33609 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: MGR ( ) Delete
Name: KIRBY, JED F
Address: 4215 MORRISON AVE
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete
Name: KIRBY, KATIE
Address: 4215 MORRISON AVE
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete
Name: HAD A GOOD DAY, LLC,
Address: 3003 WEST AZEELE ST., SUITE 200
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: WILLIAM J. PODOLSKY, III, ESQ. M 01/31/2007

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