2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042919

Entity Name: PALS LINK LLC

FILED Feb 06, 2007 Secretary of State

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

300 SOUTH HYDE PARK AVENUE, SUITE 180 TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

300 SOUTH HYDE PARK AVENUE, SUITE 180 TAMPA, FL 33606

FEI Number: 87-0778091 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOBBIE MALIA MESSMORE MESSMORE, BOBBIE M MGR

300 SOUTH HYDE PARK AVENUE, SUITE 180 300 SOUTH HYDE PARK AVENUE, SUITE 180

TAMPA, FL 33606 US TAMPA, FL 33606 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: BOBBIE M MESSMORE 02/06/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGR (X) Change () Addition Name: BOBBIE MALIA MESSMOR, E Name: MESSMORE, BOBBIE M MGR

Address: 300 SOUTH HYDE PARK AVENUE, SUITE 180 Address: 300 SOUTH HYDE PARK AVENUE, SUITE 180

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

Title: () Delete Title: MGRM () Change (X) Addition Name: MESSMORE, THOMAS A MGRM

Address: Address: 300 SOUTH HYDE PARK AVENUE, SUITE 180

City-St-Zip: City-St-Zip: TAMPA, FL 33606

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

Name: MALIA, JASON D MGRM

Address: Address: 300 SOUTH HYDE PARK AVENUE, SUITE 180

City-St-Zip: City-St-Zip: TAMPA, FL 33606

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: BOBBIE M MESSMORE MGR 02/06/2007