DO NOT WRITE IN THIS SPACE

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L06000046251 1. Entity Name

POLK ACES COMPETITIVE CHEERLEADING LLC

Principal Place of Business

3610 DAN UNIE LANE LAKELAND, FL 33813 Mailing Address

3610 DAN UNIE LANE LAKELAND, FL 33813

FILED Apr 23, 2008 08:00 AN Secretary of State



03042008 No Chg-LLC

CR2E083 (12/07)

| 4. FEI Number | t_ | Applied For |
|----------------------------------|-------------------|----------------|
| 20-4827340 | | Not Applicable |
| 5. Certificate of Status Desired | \$5.00 Fee Rec | Additional |

| | 6. Name and Address of Current Registered Agent | | | |
|---|--|--|--|--|
| CRAFT, PRESTON A 3610 DAN UNIE LANE LAKELAND, FL 33813 | | DO NOT WRITE IN THIS SPACE | | |
| 8. The above | named entity submits this statement for the nurgose of changing its regis | ered office or registered agent, or both, in the State of Florida. It am familiar with, and accept | | |
| | ions of registered agent. | | | |
| • | | 3 | | |
| SIGNATURE | Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent and title if applicable) | ered Agent signature required when reinstating) DATE | | |
| After May 1, 2008 Fee will be \$538.75 | | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | | |
| TITLE | MGRM | | | |
| NAME | CRAFT, PRESTON A | | | |
| STREET ADDRESS | 3610 DAN UNIE LANE | UDDDDD917144 | | |
| CITY-ST-ZIP | LAKELAND, FL 33813 | 05/13/08-80028-011 138.75 | | |
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| 11. I hereby certify that the information supplied with this filling 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. | | | | |

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE