2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000048501

Entity Name: AMGA, LLC

FILED Feb 06, 2007 Secretary of State

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

5860 ARLINGTON RD. 11075 BLASIUS RD.

JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32226

Current Mailing Address: New Mailing Address:

5860 ARLINGTON RD. 11075 BLASIUS RD.

JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32226

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

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

AYERS, GARY D
5860 ARLINGTON RD.
AYERS, GARY D
11075 BLASIUS RD.

JACKSONVILLE, FL 32211 US JACKSONVILLE, FL 32226 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: GARY D. AYERS 02/06/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 AYERS, GARY D
 Name:
 AYERS, GARY D

 Address:
 5860 ARLINGTON RD.
 Address:
 11075 BLASIUS RD.

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:
 JACKSONVILLE, FL 32226

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

Name:MEARS, ANNETTE AName:MEARS, ANNETTE AAddress:5860 ARLINGTON RD.Address:11075 BLASIUS RD.City-St-Zip:JACKSONVILLE, FL 32211City-St-Zip:JACKSONVILLE, FL 32226

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: GARY D. AYERS MGR 02/06/2007