2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# L06000049157

Entity Name: SYNCHRONICITY LIVE, LLC

Current Principal Place of Business:

288 W. SILVERTHORN LANE
ST. AUGUSTINE, FL 32095

New Principal Place of Business:

637 FIRST AVENUE NORTH
C
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

288 W. SILVERTHORN LANE
ST. AUGUSTINE, FL 32095

New Mailing Address:

637 FIRST AVENUE NORTH
C
JACKSONVILLE BEACH, FL 32250

FEI Number: 20-4864777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BERQUIST, ARIC
288 W. SILVERTHORN LANE
ST. AUGUSTINE, FL 32095 US

Name and Address of New Registered Agent:

BERQUIST, ARIC
637 FIRST AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 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: 04/30/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BERQUIST, ARIC
Address: 288 W. SILVERTHORN LANE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BERQUIST, ARIC
Address: 288 W. SILVERTHORN LANE
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: MGRM ( ) Change (X) Addition
Name: MUSBURGER, MARK
Address: 15613 - 223RD AVE. N.E.
City-St-Zip: WOODINVILLE, WA 98077

I hereby certify that the information supplied with this filing does not qualify 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: MARK MUSBURGER MGRM 04/30/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date