

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054382

**FILED**  
**Apr 24, 2007**  
**Secretary of State**

**Entity Name:** CHEZ SOI HOLDINGS, LLC

**Current Principal Place of Business:**

3948 3RD STREET SOUTH, SUITE 346  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

3948 3RD STREET SOUTH  
SUITE 346  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

3948 3RD STREET SOUTH, SUITE 346  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

3948 3RD STREET SOUTH  
SUITE 346  
JACKSONVILLE BEACH, FL 32250

FEI Number: 20-4960624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INTREPID REGISTERED AGENT SERVICES, LLC  
ONE INDEPENDENT DRIVE, SUITE 1200  
JACKSONVILLE, FL 32202 US

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

CONTEGA BUSINESS SERVICES, LLC  
ONE INDEPENDENT DRIVE  
SUITE 1200  
JACKSONVILLE, FL 32202 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: CHRISTIAN M. COX, VP

04/24/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: COWN, ROBERTA G  
Address: 3948 3RD STREET SOUTH, SUITE 346  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: ROBERTA G. COWN

MGR

04/24/2007

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