2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 13, 2007
Secretary of State

DOCUMENT# L06000088121

Entity Name: MEDUSA ENTERPRISES, LLC

Current Principal Place of Business:

1201 PINELLAS AVE.
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

5861 SW 103RD ST. RD.
OCALA, FL 34476 US

Current Mailing Address:

1201 PINELLAS AVE.
TARPON SPRINGS, FL 34689 US

New Mailing Address:

5861 SW 103RD ST. RD.
OCALA, FL 34476 US

FEI Number: 20-5551752 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KOURSIOTIS, CATHERINE M
1201PINELLAS AVE.
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

SALLS, DARWIN A
5861 SW 103RD ST. RD.
OCALA, FL 34476 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: DARWIN A. SALLS 01/13/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: KOURSIOTIS, CATHERINE M
Address: 1201 PINELLAS AVE.
City-St-Zip: TARPRON SPRINGS, FL 34689 US

Title: MGRM (X) Delete
Name: SALLS, DARWIN A
Address: 5861 SW 103RD ST. RD.
City-St-Zip: OCALA, FL 34476 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: SALLS, DARWIN A
Address: 5861 SW 103RD ST. RD.
City-St-Zip: OCALA, FL 34476 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DARWIN A. SALLS MGR 01/13/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date