2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 11, 2007 8:00 am Secretary of State DOCUMENT #L06000101519 04-11-2007 90152 014 ****55.00 1. Entity Name PMC, LLC Principal Place of Business Mailing Address ~~~~~ 15600 SAN CARLOS BLVD., STE 19 15600 SAN CARLOS BLVD., STE 19 FT. MYERS, FL 33908 FT. MYERS, FL 33908 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite. Apt. #. etc. 04092007 CR2E083 (12/06) Chg-LLC City & State 4. FEI Number Applied For City & State Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MEYER, GERALD L Street Address (P.O. Box Number is Not Acceptable) 15600 SAN CARLOS BLVD., STE 19 FT. MYERS, FL 33908 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of sugestated agent and title if applicable Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM Change Addition TITLE TITLE ☐ Debete NAME MEYER, GERALD L NAME 15600 SAN CARLOS BLVD., STE 19 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF FT. MYERS, FL 33908 CITY-ST-ZIP Addition ☐ Delebe TITLE DRE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Deteta TITLE TITLE ☐ Chance Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- 7P TITLE ☐ Defete MILE Addition ☐ Channe NAME NALIF STREET ADDRESS STREET ADDRESS CITY-SI-71P CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-78P 11. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I turther 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 each; 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. -GERALD L. MEYER 4-9-07

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