

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jul 07, 2008
Secretary of State**

DOCUMENT# L06000106778

Entity Name: PC MAGICIAN LLC

Current Principal Place of Business:

32514 THOROUGHBRED TRAIL
SORRENTO, FL 32776 US

New Principal Place of Business:

Current Mailing Address:

32514 THOROUGHBRED TRAIL
SORRENTO, FL 32776 US

New Mailing Address:

FEI Number: 20-5832428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SMITH, SHARON
32514 THOROUGHBRED TRAIL
SORRENTO, FL 32776 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: SMITH, BRIAN
Address: 32514 THOROUGHBRED TRAIL
City-St-Zip: SORRENTO, FL 32776 US

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

Title: MGRM () Delete
Name: SMITH, SHARON
Address: 32514 THOROUGHBRED TRAIL
City-St-Zip: SORRENTO, FL 32776 US

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

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: SHARON SMITH

MGRM

07/07/2008

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