## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT . . .

SIGNATURE

## 05-09-2007 90073 001 \*\*\*300.00 DOCUMENT # L06000121894 1. Entity Name BEYOND MEDIA INVESTMENTS, LLC Principal Place of Business Mailing Address **40 S. PALAFOX STREET 40 S. PALAFOX STREET** SUITE 500 SUITE 500 PENSACOLA FL 32502 PENSACOLA, FL 32502 2. Principal Place of Business - No P.O. Box # Mailing Address P.O. Boy Suite, Apt. #, etc. 02072007 Chg-LLC CR2E083 (12/06) City & State 4. FEI Number Applied For Not Applicable Zip Country \$5.00 Additional 32562 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BEGGS & LANE, A REGISTERED LIMITED LIABILI** Street Address (P.O. Box Number is Not Acceptable) **501 COMMENDENCIA STREET** PENSACOLA, FL 32502 Zip Code 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 registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. Manager David A. Branner Place Surkson 405, Falsfort Place Surkson Pensacala FLBASO2 TITLE TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MILE ☐ Delete TITLE □ Change Addition NAME NAME STREET ANOMESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DIE D Delete TIFLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP ☐ Delete Change : ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Belefa TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$1-71P CITY-ST-ZP 11. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further 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 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.

FILED Jun 04, 2007 8:00 am Secretary of State