2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 28, 2008
Secretary of State

DOCUMENT# L07000011389

Entity Name: N146TC, LLC

Current Principal Place of Business:

13300 ATLANTIC BLVD
APT. 1620
JACKSONVILLE, FL 32225

New Principal Place of Business:

15407 MCGINTY ROAD WEST
DEPT. 28
WAYZATA, MN 55391

Current Mailing Address:

13300 ATLANTIC BLVD
APT. 1620
JACKSONVILLE, FL 32225

New Mailing Address:

15407 MCGINTY ROAD WEST
DEPT. 28
WAYZATA, MN 55391

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

MACMILLAN, JOHN C JR.
13300 ATLANTIC BLVD
APT. 1620
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

MACMILLAN, JOHN C JR.
1461 PONTE VEDRA BLVD
PONTE VEDRA BEACH, FL 32082 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: _____ 05/28/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MACMILLAN, JOHN C JR.
Address: 13300 ATLANTIC BLVD APT. 1620
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MACMILLAN, JOHN C JR.
Address: 550 14TH ROAD SOUTH APT. 724
City-St-Zip: ARLINGTON, VA 22202

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: HEATHER A EIGSTI SECR 05/28/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date