

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002437

FILED  
Jan 05, 2006  
Secretary of State

**Entity Name:** PENDULUM MANAGEMENT COMPANY LLC

**Current Principal Place of Business:**

11452 HWY. 62, SUITE 218  
CHARLESTOWN, IN 47111

**New Principal Place of Business:**

**Current Mailing Address:**

11452 HWY. 62, SUITE 218  
CHARLESTOWN, IN 47111

**New Mailing Address:**

**FEI Number:** 62-1747755

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAUNDERS, CHARLES  
4734 PAPAYA PARK  
DESTIN, FL 32541 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM ( ) Delete  
Name: SAUNDERS, CHARLES  
Address: 4734 PAPAYA PARK  
City-St-Zip: DESTIN, FL 32541

Title: MGRM ( ) Delete  
Name: BURGIN, JAMES  
Address: 2100 KETTLEBOTTOM RD.  
City-St-Zip: NABB, IN 47147

Title: MGRM ( ) Delete  
Name: FUNK, LEONARD  
Address: 1860 MARVY LN. NE  
City-St-Zip: PALMYRA, IN 47164

**ADDITIONS/CHANGES:**

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

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

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: LEONARD K FUNK

MGRM

01/05/2006

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