2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 06, 2006 08:00 AM **Secretary of State** DOCUMENT # M0100000385 IOSA MANAGEMENT COMPANY, L.L.C. Principal Place of Business Mailing Address 2853 RINGWOOD MEADOW 2853 RINGWOOD MEADOW SARASOTA, FL 34235 SARASOTA, FL 34235 02282006 No Chg-LLC CRZE083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 74-2991531 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AMSPOKER, ROBERT D DO NOT WRITE 2853 RINGWOOD MEADOW SARASOTA, FL 34235 IN THIS SPACE 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) DATE Filing Fee is \$50.00 Due by May 1, 2006 HHIUUH45.2526 03/17/06-88867**-023** 50.0**0** MANAGING MEMBERS/MANAGERS 9. MGRM INTE M & M ASSOCIATES, INC. NAME 2853 RINGWOOD MEADOW STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34235 mre STREET ADDRESS CHY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-SY-ZIP 7173.5 IN THIS SPACE STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this fiting 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 it 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.

MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP RRE NAME STREET ADDRESS CIFY-ST-ZIP

FILED