

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003991

Entity Name: ON TARGET MEDIA, LLC

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

8230 MONTGOMERY ROAD, SUITE 300
CINCINNATI, OH 45236

New Principal Place of Business:

Current Mailing Address:

8230 MONTGOMERY ROAD, SUITE 300
CINCINNATI, OH 45236

New Mailing Address:

FEI Number: 01-0736473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: WOOD, FRANK E
Address: 8230 MONTGOMERY ROAD, SUITE 300
City-St-Zip: CINCINNATI, OH 45236

Title: MGR () Delete
Name: CRABB, JOHN R
Address: 8230 MONTGOMERY ROAD, SUITE 300
City-St-Zip: CINCINNATI, OH 45236

Title: MGR () Delete
Name: WYANT, PEG
Address: 8230 MONTGOMERY ROAD, SUITE 300
City-St-Zip: CINCINNATI, OH 45236

Title: MGR () Delete
Name: COLLETTE, MICHAEL
Address: 8230 MONTGOMERY ROAD, SUITE 300
City-St-Zip: CINCINNATI, OH 45236

Title: MGR () Delete
Name: GRAVES, JAMES
Address: 8230 MONTGOMERY ROAD, SUITE 300
City-St-Zip: CINCINNATI, OH 45236

ADDITIONS/CHANGES:

Title: MEMB (X) Change () Addition
Name: BULLSEYE VENTURES IN, C
Address: 8230 MONTGOMERY ROAD, SUITE 300
City-St-Zip: CINCINNATI, OH 45236

Title: MEMB (X) Change () Addition
Name: ALTA/ON TARGET INVES, TMENT CORP
Address: 200 CLARENDON STREET 51ST FLOOR
City-St-Zip: BOSTON, MA 02116

Title: MEMB (X) Change () Addition
Name: SECRET HEALTH LLC,
Address: 312 WALNUT STREET SUITE 3550
City-St-Zip: CINCINNATI, OH 45202

Title: MEMB (X) Change () Addition
Name: FUND ISABELLA,
Address: 1995 MADISON RD
City-St-Zip: CINCINNATI, OH 45208

Title: MEMB (X) Change () Addition
Name: MCG IH OTM,
Address: 1100 WILSON BLVD SUITE 3000
City-St-Zip: ARLINGTON, VA 22209

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: MICHAEL COLLETTE

PRES

04/24/2006

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