

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005432

FILED
May 10, 2007
Secretary of State

Entity Name: PAICE LLC

Current Principal Place of Business:

22957 SHADY KNOLL DR.
BONITA SPRINGS, FL 37135

New Principal Place of Business:

22957 SHADY KNOLL DR.
BONITA SPRINGS, FL 34135

Current Mailing Address:

22957 SHADY KNOLL DR.
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 20-1975539 FEI Number Applied For () FEI Number Not Applicable () 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:

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: OSWALD, ROBERT
Address: 22957 SHADY KNOLL DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: () Delete
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City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OSWALD, ROBERT S
Address: 22957 SHADY KNOLL DR
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Change (X) Addition
Name: HIRSCH, DAVID S
Address: 37 WEST 12TH STREET, APT. PHC
City-St-Zip: NEW YORK, NY 10011

Title: MGRM () Change (X) Addition
Name: KEENAN, FRANCES
Address: 111 SOUTH CALVERT STREET, SUITE 2300
City-St-Zip: BALTIMORE, MD 21202

Title: MGRM () Change (X) Addition
Name: KEMPTON, GEORGE R
Address: 3991 GULF SHORE BLVD NORTH, #101
City-St-Zip: NAPLES, FL 34103

Title: MRGM () Change (X) Addition
Name: TEMPLIN, ROBERT J
Address: 605 ROBIN DALE DRIVE
City-St-Zip: AUSTIN, TX 78734

Title: MGRM () Change (X) Addition
Name: TYDINGS, JOSEPH D SEN.
Address: 1825 EYE STREET NW
City-St-Zip: WASHINGTON, DC 20006

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: ROBERT S. OSWALD

MGRM

05/10/2007

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