2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT FILED DOCUMENT # M05000002114 - - -Apr 27, 2006 08:00 AN **Secretary of State** C SQUARED STRAWBERRY TREE LANE, LLC Mailing Address Principal Place of Business 22 DARYLDRIVE 22 DARKLDRIVE **CFINDA OA 94563** CFINDA OA 94563 01092006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2627479 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent UCC FILING & SEARCH SERVICES, INC. DO NOT WRITE 1574 VILLAGE SQUARE BLVD SUITE 100 IN THIS SPACE TALLAHASSEE, FL 32309 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) Filing Fee is \$50.00 Due by May 1, 2006 U000000540801 05/10/06-80033-001 50.00 MANAGING MEMBERS/MANAGERS 9. MGR TITLE CREVIN, LARRY J NAME STREET ADDRESS 22 DARYL DRIVE CITY-ST-ZIP **ORINDA, CA 94563** TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing 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 if made under oath; that I am a managing member or manager of the limited liability company or the receipt or register empowered to execute this report as required by Chapter 608, Florida Statutes.