

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004102

FILED
Apr 26, 2006
Secretary of State

Entity Name: A MOMENT IN TIME IMAGES LLC

Current Principal Place of Business:

780 EVERGLADES CT
TITUSVILLE, FL 32780

New Principal Place of Business:

7485 TURKEY POINT DRIVE
TITUSVILLE, FL 32780

Current Mailing Address:

780 EVERGLADES CT
TITUSVILLE, FL 32780

New Mailing Address:

7485 TURKEY POINT DRIVE
TITUSVILLE, FL 32780

FEI Number: 02-0549517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COX, GORDON
780 EVERGLADES CT
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

COX, GORDON
7485 TURKEY POINT DRIVE
TITUSVILLE, FL 32780 US

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:

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COX, GORDON
Address: 780 EVERGLADES CT
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM () Delete
Name: SMALL, KATHERINE
Address: 780 EVERGLADES CT
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COX, GORDON
Address: 7485 TURKEY POINT DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM (X) Change () Addition
Name: SMALL, KATHERINE
Address: 7485 TURKEY POINT DRIVE
City-St-Zip: TITUSVILLE, FL 32780

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: GORDON COX

MGRM

04/26/2006

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