ANNUAL REPORT	~
DOCUMENT # M0500006126 1. Entity Name KATSPEED TRAP, LLC	2006 MAY 31 AM 10: 54 TALLAHASSY OF ST
Principal Place of Business 7606 SMITH CREEK RD 7607 SMITH CREEK RD 7607 SMITH CREEK RD 7608 SMITH CREEK RD 7	TUY COSFE SIATE
DO NOT WRITE IN THIS SPA	05302006No Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For Not Applicable 20-3774551 Not Applicable 5. Certificate of Status Desired □ \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent MCELVEEN, VICTORIA K 7606 SMITH CREEK RD SOPCHOPPY, FL 32358	DO NOT WRITE 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 September 6, 2006	
9. MANAGING MEMBERS/MANAGERS TITLE MGRM NAME MCELVEEN, VICTORIA STREET ADDRESS P.O.B. 61 SOPCHOPPY, FL 32358 TITLE	400076195354 06/14/0601021010 **\$0.00
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	
17. 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: Victoria K. McElver 5/30/06 962-1957 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone •	