2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M06000001082

1. Entity Name
LOTTERY DYNAMICS LLC

Principal Place of Business	Mailing Address
~~5215 NORTH O'CONNOR BLVD., SUITE 200~~ ~~IRVING, TX 75039~~	~~5215 NORTH O'CONNOR BLVD., SUITE 200~~ ~~IRVING, TX 75039~~

40130201

07312007   Chg-LLC   CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #
11551 Forest Central Drive
Suite, Apt. #, etc.
Suite 118
City & State
Dallas, Texas
Zip 75243   Country USA

3. Mailing Address
11551 Forest Central Drive
Suite, Apt. #, etc.
Suite 118
City & State
Dallas, Texas
Zip 75243   Country USA

4. FEI Number
02-0718807
Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☒   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.
515 EAST PARK AVE.
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City   FL   Zip Code

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

CK # 1838

Filing Fee is $50.00
Due by September 14, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE MGRM ☐ Delete **NAME** BATOFF, EDWARD L **STREET ADDRESS** 16425 COLLINS AVE. **CITY-ST-ZIP** SUNNY ISLES BEACH, FL 33160		**TITLE** **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Change ☐ Addition
TITLE MGRM ☐ Delete **NAME** CHRISTIE, NIGEL B **STREET ADDRESS** 31-A ST. JAMES SQUARE **CITY-ST-ZIP** LONDON, SW1Y 4JR, UK,		**TITLE** MGRM **NAME** Christie, Nigel B. **STREET ADDRESS** 37 Dymock Street **CITY-ST-ZIP** London SW6 3ET, United Kingdom	☒ Change ☐ Addition
TITLE MGRM ☐ Delete **NAME** DAVIS, MARK B **STREET ADDRESS** PALMA REAL TWR., #15-JK, CALLE MADRID #2 **CITY-ST-ZIP** SAN JUAN, PR 00907		**TITLE** MGRM **NAME** Davis, Mark B. **STREET ADDRESS** VIG Tower, Suite PH1 1225 Ponce de Leon Ave. **CITY-ST-ZIP** San Juan, Puerto Rico 00907	☒ Change ☐ Addition
TITLE MGRM ☒ Delete **NAME** EGLI, STEPHAN J **STREET ADDRESS** 5215 N. O'CONNOR BLVD., SUITE 200 **CITY-ST-ZIP** IRVING, TX 75039		**TITLE** MGRM **NAME** Schultz, Robert **STREET ADDRESS** 810 Old Beach Glen Road **CITY-ST-ZIP** Boonton, NJ 07005	☐ Change ☒ Addition
TITLE MGRM ☐ Delete **NAME** GRIFFIN, DAVID **STREET ADDRESS** 800 1/2 N. CALHOUN STREET **CITY-ST-ZIP** TALLAHASSEE, FL 32303		**TITLE** MGRM **NAME** Griffin, David **STREET ADDRESS** 201 S. Monroe, Suite 201 **CITY-ST-ZIP** Tallahassee, Florida 32301	☒ Change ☐ Addition
TITLE MGRM ☐ Delete **NAME** POWELL, HUMBERT B III **STREET ADDRESS** 527 MADISON AVE., 10TH FLOOR **CITY-ST-ZIP** NEW YORK, NY 10022		**TITLE** **NAME** **STREET ADDRESS** **CITY-ST-ZIP**	☐ Change ☐ Addition

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _James E. Kurr_   July 31, 2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #