## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

## Sep 07, 2006 8:00 am Secretary of State DOCUMENT #L04000083688 09-07-2006 90036 011 \*\*\*\*50.00 REDTAIL BAR AND GRILLE, LLC Principal Place of Business Mailing Address 2724 S. PENINSULA DRIVE 2724 S. PENINSULA DRIVE 20054094 DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32118 2. Principal Place of Business 230 S. Dlach Street 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06272006 Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For City & State City & State Not Applicable 20-1896220 Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 32114 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PALMETTO CHARTER SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 150 MAGNOLIA AVE: DAYTONA BEACH, FL 32114 Zip Code City 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. DATE Make check payable to Filing Fee is \$50.00 Florida Department of State Due by September 6, 2006 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. ☐ Change ☐ Addition TITLE MGR 🤼 Delete TITLE FOLEY, HENRY J NAME STREET ADDRESS STREET ADDRESS 2724 S. PENINSULA DRIVE CITY-ST-ZIP DAYTONA BEACH, FL 32118 CITY-ST-ZIP Change Addition TITLE TITLE MASELLA, MICHAEL NAME NAME STREET ADDRESS 2724 S. PENINSULA DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH, FL 32118 ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 received or trustee impowered to execute this report as required by Chapter 608, Florida Statutes.

FILED