

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093696

FILED  
May 02, 2006  
Secretary of State

Entity Name: THE LOBLOLLY FUND, LLC

**Current Principal Place of Business:**

7407 SE HILL TERRACE  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

7407 SE HILL TERRACE  
HOBE SOUND, FL 33455

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CORNETT, JANE L ESQ  
401 E. OSCEOLA STREET  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: C                      ( ) Delete  
Name: FARLEY, MARY KAY  
Address: 7407 SE HILL TERRACE  
City-St-Zip: HOBE SOUND, FL 33455

Title: T                      ( ) Delete  
Name: SULLIVAN, JOHN  
Address: 7407 S E HILL TERRACE  
City-St-Zip: HOBE SOUND, FL 33455

Title: T                      ( ) Delete  
Name: JONES, JOHN  
Address: 7407 S E HILL TERRACE  
City-St-Zip: HOBE SOUND, FL 33455

Title: T                      ( ) Delete  
Name: KELLER, JOHN  
Address: 7407 S E HILL TERRACE  
City-St-Zip: HOBE SOUND, FL 33455

Title: T                      ( ) Delete  
Name: MYERS, BOB  
Address: 7407 S E HILL TERRACE  
City-St-Zip: HOBE SOUND, FL 33455

Title: T                      ( ) Delete  
Name: MCCREE, DON  
Address: 7407 S E HILL TERRACE  
City-St-Zip: HOBE SOUND, FL 33455

**ADDITIONS/CHANGES:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DON MCCREE

T

05/02/2006

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