

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019728

FILED
Apr 29, 2006
Secretary of State

Entity Name: FAMILYSTONE, LLC

Current Principal Place of Business:

5213 STOCKTON WAY
TAMPA, FL 33647

New Principal Place of Business:

8213 STOCKTON WAY
TAMPA, FL 33647

Current Mailing Address:

5213 STOCKTON WAY
TAMPA, FL 33647

New Mailing Address:

8213 STOCKTON WAY
TAMPA, FL 33647

FEI Number: 81-0665515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
SUITE E, 773 4TH AVENUE NORTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

MUNGENAST, JOHN
8213 STOCKTON WAY
TAMPA, FL 33647 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: JOHN MUNGENAST

04/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VIVA CHAPARRAL PROPE, RTTIES, LP, LL C
Address: 5213 STOCKTON WAY
City-St-Zip: TAMPA, FL 33647

Title: MGR () Delete
Name: SPIRIT OF 76, LLC,
Address: 5213 STOCKTON WAY
City-St-Zip: TAMPA, FL 33647

Title: MGR () Delete
Name: BERAUDO, PATRICIA H
Address: 5213 STOCKTON WAY
City-St-Zip: TAMPA, FL 33647

Title: MGR () Delete
Name: MUNGENAST, JOHN E
Address: 5213 STOCKTON WAY
City-St-Zip: TAMPA, FL 33647

Title: MGR () Delete
Name: MUNGENAST, PATRICIA A
Address: 5213 STOCKTON WAY
City-St-Zip: TAMPA, FL 33647

Title: MGR () Delete
Name: MUNGENAST, JAMES E
Address: 5213 STOCKTON WAY
City-St-Zip: TAMPA, FL 33647

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: JOHN MUNGENAST

MGR/

04/29/2006

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