2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025315

Entity Name: CORBREE L.L.C.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3926 KILMARNOCK APOPKA, FL 32712

Current Mailing Address: New Mailing Address:

3926 KILMARNOCK P.O.BOX421436 APOPKA, FL 32712 P.O.BOX421436 KISSIMMEE, FL 34742

FEI Number: 26-0011213 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CLEMENTS, LATOYA 3926 KILMARNOCK APOPKA, FL 32712 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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

e: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 EDMUNDS, JAMILA
 Name:
 EDMUNDS, JAMILA

 Address:
 PO BOX 1572
 Address:
 PO BOX 421436

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:
 KISSIMMEE, FL 34742

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:EDMUNDS, THOMAS JName:EDMUNDS, THOMAS JAddress:PO BOX 1572Address:PO BOX 421436City-St-Zip:WINDERMERE, FL 34786City-St-Zip:KISSIMMEE, FL 34742

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: JAMILA EDMUNDS MGRM 04/30/2006