

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092921

FILED  
Jul 17, 2006  
Secretary of State

Entity Name: ANGUS ACRES, LLC

**Current Principal Place of Business:**

800 SOUTH PARROTT AVENUE  
OKEECHOBEE, FL 34974 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 SOUTH PARROTT AVENUE  
OKEECHOBEE, FL 34974 US

**New Mailing Address:**

FEI Number: 20-3511890      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

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

WADLINGTON, CHARLES E  
800 SOUTH PARROTT AVENUE  
OKEECHOBEE, FL 34974 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WADLINGTON, CHARLES E  
Address: 800 SOUTH PARROTT AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: MGRM ( ) Delete  
Name: KINTY, AARON  
Address: 2341 SE 27TH STREET  
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: MGRM ( ) Delete  
Name: HOLLY, EUGENE H  
Address: 800 SOUTH PARROTT AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: MGRM ( ) Delete  
Name: HOLLY, JUDITH H  
Address: 800 SOUTH PARROTT AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974 US

**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:

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: CHARLES E. WADLINGTON SR.

MANA

07/17/2006

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