

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000328

Entity Name: COCODRIE'S LLC

FILED  
Jul 17, 2006  
Secretary of State

## Current Principal Place of Business:

COCODRIES RESTUARANT  
8469 GOLF BLVD.  
MANATEE BEACH, FL 32566

## Current Mailing Address:

18325 MANCHAC PLACE DR  
PRAIRIEVILLE, LA 70769

## New Principal Place of Business:

COCODRIES RESTUARANT  
8469 GOLF BLVD.  
NAVARRE BEACH, FL 32566

## New Mailing Address:

21394 STONE BRIDGE COURT  
DENHAM SPRINGS, LA 70726

FEI Number: 02-0655484      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:

VOLLAND, RICK  
8649 GULF BLVD.  
NAVARRE BEACH, FL 32566      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: MGRM      ( ) Delete  
Name: VOLLAND, RICK  
Address: 18325 MANCHAC PLACE DR  
City-St-Zip: PRAIRIEVILLE, LA 70769

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change      ( ) Addition  
Name: VOLLAND, RICK  
Address: 21394 STONE BRIDGE COURT  
City-St-Zip: DENHAM SPRINGS, LA 70726

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: RICK VOLLAND

OWNE

07/17/2006

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