


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # M03000001022 1. Entity Name SAWGRASS LANDING BREAD, LLC |  |
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| Principal Place of Business 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 | Mailing Address 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |
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02272006 No Chg-LLC CR2E083 (11/05)

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| 4. FEI Number 01-0778436 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

| | |
|---|---------------------------------------|
| 6. Name and Address of Current Registered Agent KIRK, WILLIAM N GOULD, COOKSEY, FENNELL ET AL, PA 979 BEACHLAND BLVD VERO BEACH, FL 32963 | DO NOT WRITE IN THIS SPACE |
|---|---------------------------------------|

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2006**

1000000461839
03/21/06-80011-022 50.00

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR KAROLICK, H. ROGER 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR PAYNE, LARRY F 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR WIGGINS, DALE E 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR WALSH, WILLIAM J JR 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR KIRK, ALBERT J 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR MILLER, KENNETH R 2414 NORTH WOODLAWN, SUITE 201 WICHITA, KS 67220 |

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: William J. Walsh Jr William J Walsh Jr 3/3/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #