

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000004454

1. Entity Name
 GRANGE L.L.C.



Principal Place of Business
 1001 3RD AVENUE WEST
 SUITE 700
 BRADENTON, FL 34205

Mailing Address
 1001 3RD AVENUE WEST
 SUITE 700
 BRADENTON, FL 34205



02092006 No Chg-LLC

CR2E063 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 65-1009283

Applied For
 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

VENABLE, JOSEPH P
 1400 4TH AVENUE WEST
 BRADENTON, FL 34205

**DO NOT WRITE
 IN THIS SPACE**

6. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CRESPI, GIULIO
STREET ADDRESS	VIA RISCOLI 2
CITY-ST-ZIP	20121 MILAN ITALY,
TITLE	MGR
NAME	BENNEWITZ, ULI
STREET ADDRESS	1001 3RD AVENUE WEST
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	MGR
NAME	CHRISOPHER, ROBERT
STREET ADDRESS	1001 3RD AVENUE WEST
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 03/08/06-80019-017 150.00

**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: Robert Christopher 2/9/06 (941) 748-1040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #