2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000007260

1. Entity Name
COUNTESS PROPERTIES, L.L.C.

Principal Place of Business	Mailing Address
2866 WILDWOOD DR CLEARWATER, FL 33761	2866 WILDWOOD DR CLEARWATER, FL 33761

03162006 No Chg-LLC CR2E003 (11/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
67-1111112
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GASSMAN, ALAN S ESQ
1246 COURT ST
SUITE 102
CLEARWATER, FL 33756

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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

U00000518515
05/02/06-80015-005 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	STIEREN, ANGELIKA
STREET ADDRESS	2866 WILDWOOD DR
CITY-ST-ZIP	CLEARWATER, FL 33761
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 4-15-06 727-415-0253
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #