

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000008019**

1. Entity Name  
21 BLANDING, LLC



Principal Place of Business  
45 WEST BAY STREET, SUITE 203  
JACKSONVILLE, FL 32202

Mailing Address  
45 WEST BAY STREET, SUITE 203  
JACKSONVILLE, FL 32202



01052006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3656337**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

GRUNTHAL, LEONARD H III  
45 WEST BAY STREET, SUITE 203  
JACKSONVILLE, FL 32202

**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

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          | MEM                               |
| NAME           | SCHUETH, WILLIAM JR               |
| STREET ADDRESS | 45 W. BAY STREET, SUITE 203       |
| CITY-ST-ZIP    | JACKSONVILLE, FL 32202            |
| TITLE          | MEM                               |
| NAME           | PENNINGTON, RUFUS C III           |
| STREET ADDRESS | ONE INDEPENDENT DRIVE, SUITE 1700 |
| CITY-ST-ZIP    | JACKSONVILLE, FL 32202            |
| TITLE          | MGRM                              |
| NAME           | GRUNTHAL, III, LEONARD H          |
| STREET ADDRESS | 45 W BAY ST, STE 203              |
| CITY-ST-ZIP    | JACKSONVILLE, FL 32202            |
| TITLE          |                                   |
| NAME           |                                   |
| STREET ADDRESS |                                   |
| CITY-ST-ZIP    |                                   |
| TITLE          |                                   |
| NAME           |                                   |
| STREET ADDRESS |                                   |
| CITY-ST-ZIP    |                                   |

1000000485466  
04/12/06-80084-011 \$0.00

**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:**

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

Leonard H. Grunthal III

Date

3/28/06

Daytime Phone #

904 356-1060