2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000014945

1. Entity Name PLACE PLAN, LLC



FILED Apr 05, 2006 08:00 AM Secretary of State

Principal Place of Business 2331 MARCEL DR. ORANGE PARK, FL 32073 Mailing Address 2331 MARCEL DR. ORANGE PARK, FL 32073



04032006No Chg-LLC

CR2E083 (11/05)

4. FEt Number 59-3683845

Applied For Not Applicable

5. Certificate of Status Desired

55.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVID, CYNTHIA S 2331 MARCEL DR ORANGE PARK, FL 32073

STREET ADDRESS CHY-ST-ZIP TIFLE NAME STREET ADDRESS CHY-ST-ZIP

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	e named entity submits this statement for the purpose of chartons of registered agent. Signature, offed or printed name of registered agent and title if applicable.	inging its registered office or registered agent, or be (NOTE Registered Agent algorithm required when releasting)	oth, in the State of Florida. I am familiar with, and accept	
F	iling Fee is \$50.00 we by May 1, 2006			
5.	MANAGING MEMBERS/MANAGERS			
TRLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAVID, CYNTHIA S 2331 MARCEL DR. ORANGE PARK, FL 32073			
TITLE NAME STITLET ADDRESS CITY-ST-ZIP			000000493052 04/19/06:80098-812 58,00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
THILE NAME STREET ADDRESS CHY-ST-ZIP		IN	IN THIS SPACE	
TITLE				

11. I hereby certify that the Information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Ffortida 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 ceth; 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, Flortida Statutes.

SIGNATURE:

signature and typeg of printed name of signing managing member, or authorized representative

Date

Daytima Phone #