

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007890

Entity Name: ROMAIN MOTIER, LLC

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

82 SIXTH ST.
APALACHICOLA, FL 32320

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 250
APALACHICOLA, FL 32320

New Mailing Address:

FEI Number: 59-3718995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUCIMETIERE-MONOD, OLIVIER
82 SIXTH ST.
APALACHICOLA, FL 32320 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DUCIMETIERE-MONOD, OLIVIER
Address: 82 SIXTH ST.
City-St-Zip: APALACHICOLA, FL 32320

Title: D () Delete
Name: BACHRACH, JAMES
Address: 115 BAY AVE
City-St-Zip: APALACHICOLA, FL 32320

Title: D () Delete
Name: BANKS, KRISTY
Address: 82 6TH ST
City-St-Zip: APALACHICOLA, FL 32320

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: OLIVIER DUCIMETIERE-MONOD

MGRM

04/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date