

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011052

Entity Name: OLD COUNTRYSIDE, LLC

FILED  
Apr 30, 2006  
Secretary of State

**Current Principal Place of Business:**

907 WHITEWATER COURT  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

907 WHITEWATER COURT  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 59-3730080

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WALSH, ROBERT S  
907 WHITEWATER CT.  
ALTAMONTE SPRINGS, FL 32714 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: WALSH, ROBERT S  
Address: 31109 PAYNE ROAD  
City-St-Zip: SORRENTO, FL 32776

Title: MGRM ( ) Delete  
Name: SEARS, SAMUEL F  
Address: 740 MUIRFIELD CIR  
City-St-Zip: APOPKA, FL 32712

Title: MGRM ( ) Delete  
Name: KEENAN, MARK A  
Address: 500 PICKFORD PT.  
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM ( ) Delete  
Name: KEENAN, JOHN C  
Address: 907 WHITEWATER CT.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM ( ) Delete  
Name: WALSH, CHRISTOPHER S  
Address: 2214 LUFF OAK STREET  
City-St-Zip: APOPKA, FL 32712

**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:

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: MARK A KEENAN

MGRM

04/30/2006

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