

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90055 041 ***150.00

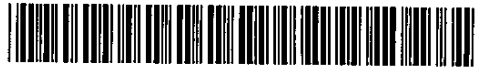
DOCUMENT # L01000017813

1. Entity Name
SPEAR FAMILY INVESTMENT CLUB, LLC



Principal Place of Business
**322 WOODS AVE.
TAVERNIER, FL 33070**

Mailing Address
**322 WOODS AVE.
TAVERNIER, FL 33070**



04092006 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
65-1140161

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TOLLEY, SHAWN
9200 S DADELAND BLVD
SUITE #412
MIAMI, FL 33156**

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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
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
SPEAR, JON
7920 ALLEN DRIVE
HOLLYWOOD, FL 330247150**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
SPEAR, VIRGINIA
322 WOODS AVE
TAVERNIER, FL 33070**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: ✓ *Virginia Spear*

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

✓ Date

4-14-06

Daytime Phone #