## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

## May 15, 2006 08:00 A Secretary of State **DOCUMENT # L01000017833** 1. Entity Name DESKEN, LC. Principal Place of Business Mailing Address 587 SW MAIN BLVD 587 SW MAIN BLVD SUITE 100 SUITE 100 LAKE CITY, FL 32025 LAKE CITY, FL. 32025 02092006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 01-0579050 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent KENNETH JOYE, DONALD JR. DO NOT WRITE 587 SW MAIN BLVD STE 100 LAKE CITY, FL 32025 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. U000000564621 Filing Fee is \$50.00 Due by May 1, 2006 05/20/06-8008T-024 50.00 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM . 10.00 KENNETH JOYE, DONALD JR. NAME STREET ADDRESS 360 SW THOMAS TERRACE LAKE CITY, FL 32024 DITY-ST-ZIP **MGRM** TITLE NAME JORDAN JOYE, DESLEIGH STREET ADDRESS 360 SW THOMAS TERRACE CITY-ST-7IP LAKE CITY, FL 32024 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZP 11. I hereby certify that the information supplied with this filling 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 on the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

0511