
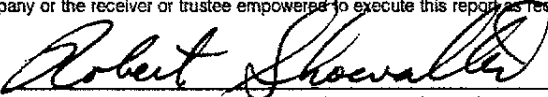


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 10, 2006 08:00 AM
Secretary of State**

DOCUMENT # L01000018748		
1. Entity Name SHOWALTER FAMILY, LLC		
Principal Place of Business 102 CLUBHOUSE DR. #377 NAPLES, FL 34105	Mailing Address 102 CLUBHOUSE DR. #377 NAPLES, FL 34105	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SHOWALTER, ROBERT 102 CLUBHOUSE DR. #377 NAPLES, FL 34105		DO NOT WRITE 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: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHOWALTER, ROBERT 102 CLUBHOUSE DR. #377 NAPLES, FL 34105	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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: 		1-7-2006 (239) 649-4743
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>



01072006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
59-3757549

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required