

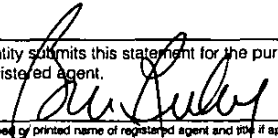



# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90017 004 \*\*\*\*50.00

<b>DOCUMENT # L02000002348</b> 1. Entity Name <b>REICHEL DEVELOPMENT, LLC</b>					
Principal Place of Business <b>4524 GUN CLUB ROAD SUITE 212, ATTN: WILLIAM B. REICHEL WEST PALM BEACH, FL 33415</b>			Mailing Address <b>4524 GUN CLUB ROAD SUITE 212, ATTN: WILLIAM B. REICHEL WEST PALM BEACH, FL 33415</b>		
2. Principal Place of Business <b>8845 N. Military Trail</b> Suite, Apt. #, etc. <b>Suite 100</b> City & State <b>Palm Beach Gardens, FL</b> Zip <b>33410</b>		3. Mailing Address <b>8845 N. Military Trail</b> Suite, Apt. #, etc. <b>Suite 100</b> City & State <b>Palm Beach Gardens, FL</b> Zip <b>33410</b>		<b>60035997</b> 	
4. FEI Number <b>01-0588975</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required				03062006 Chg-LLC CR2E083 (11/05)	
6. Name and Address of Current Registered Agent  <b>ANGELL CORPORATE SERVICES, INC. ONE NORTH CLEMATIS STREET SUITE 400 WEST PALM BEACH, FL 33401</b>				7. Name and Address of New Registered Agent Name <b>Reichel, William B.</b> Street Address (P.O. Box Number is Not Acceptable) <b>8845 N. Military Trail #100</b> City <b>Palm Beach Gardens</b> <b>FL</b> Zip Code <b>33410</b>	
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  DATE <b>4/27/06</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>REICHEL, WILLIAM B</b> <b>4534 GUN CLUB RD STE 212</b> <b>WEST PALM BEACH, FL 33415</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>Reichel, William B.</b> <b>8845 N. Military Trail, Ste.100</b> <b>Palm Beach Gardens, FL 33410</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.					
<b>SIGNATURE:</b> 			<b>4/27/06 561-478-4440</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					