

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 07, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000003743
 1. Entity Name
BIRD & LEINBACK, P.L.



Principal Place of Business 385 N. JEFFERSON STREET MONTICELLO, FL 32344	Mailing Address 385 N. JEFFERSON STREET MONTICELLO, FL 32344
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DO NOT WRITE IN THIS SPACE



02232006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 04-3649738	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BIRD, T. BUCKINGHAM
 385 N. JEFFERSON STREET
 MONTICELLO, FL 32344

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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 _____ (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 BIRD, T. BUCKINGHAM 872 WAUKEENAH HIGHWAY MONTICELLO, FL 32344
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEINBACK, BRUCE 385 N. JEFFERSON STREET MONTICELLO, FL 32344
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 08/07/06-80001-007 50.00

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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: *J. Buckingham Bird* **3/28/06** **850 997-3503**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #