2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000015613

1. Entity Name
ATKINSON FAMILY, LLC

Principal Place of Business	Mailing Address
152 HILLTOP DRIVE SANTA ROSA BEACH, FL 32459	152 HILLTOP DRIVE SANTA ROSA BEACH, FL 32459

01042006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0462843
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PORATH, SHANNON L
2441 U.S. HWY 98 E
108
SANTA ROSA BEACH, FL 32459

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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 _____
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	MGRM
NAME	ATKINSON, WILLIAM T JR
STREET ADDRESS	152 HILLTOP DR
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	MGRM
NAME	ATKINSON, SUZANNE
STREET ADDRESS	152 HILLTOP DR
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	MGRM
NAME	ATKINSON, BILL
STREET ADDRESS	316 DIXIE DRIVE
CITY-ST-ZIP	TOWSON, MD 21204
TITLE	MGRM
NAME	D'HEMECOURT, JANE
STREET ADDRESS	23185 HIGHWAY 435
CITY-ST-ZIP	ABITA SPRINGS, LA 70420
TITLE	MGRM
NAME	FINDLING, JULIANNE
STREET ADDRESS	537 HEYWARD CIRCLE
CITY-ST-ZIP	MARIETTA, GA 30064
TITLE	MGRM
NAME	ATKINSON, PHILLIP
STREET ADDRESS	1616 PIEDMONT AVE
CITY-ST-ZIP	ATLANTA, GA 30324

U00000524376
05/03/06-80110-017 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: William T. Atkinson Jr APRIL 15, 2006 850-267-2121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

WILLIAM T. ATKINSON JR