


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 18, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000017705**

1. Entity Name  
**THE GARDEN APARTMENTS OF TALLAHASSEE, LLC**



Principal Place of Business      Mailing Address

5155 WEST THARPE ST.  
TALLAHASSEE, FL 32303      5155 WEST THARPE ST.  
TALLAHASSEE, FL 32303

**DO NOT WRITE IN THIS SPACE**



01132006No Chg-LLC      CR2E083 (11/05)

4. FEI Number      Applied For  
**33-1019743**      Not Applicable

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

6. Name and Address of Current Registered Agent

**BENTON, RICHARD E**  
**1415 EAST PIEDMONT DR., STE. 4**  
**TALLAHASSEE, FL 32308**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUDD, DAVID E 9049 OLD CHEMONIE RD TALLAHASSEE, FL 32309
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01/23/06-60020-021 50.00

**DO NOT WRITE IN THIS SPACE**

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 S. Rudd      William Rudd      1-16-06      850 580 2495

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