


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000021089 1. Entity Name LEIBRA, LLC	
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Principal Place of Business 615 WOODHAVEN DRIVE OPP, AL 36467	Mailing Address 615 WOODHAVEN DRIVE OPP, AL 36467
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DO NOT WRITE IN THIS SPACE



01242006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 16-1623962	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent BRANNON, GEORGE T SR. 14 CLAYTON LANE SUITE 14 GRAYTON BEACH, FL 32459
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**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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

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

000000475885
04/05/06-80035-001 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SULLIVAN, JIM 615 WOODHAVEN DR. OPP, AL 36467
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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: Rebecca S. Sullivan **3-6-06 334-493-3147**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #