2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 03, 2006 08:00 AN Secretary of State

ANNUAL REPURI				Secretary of State	
DOCU 1. Entity Nan LWR-TO		886		Secretary of State	
Principal Place of Business Maifing Address 6215 LORRAINE ROAD 6215 LORRAINE ROAD 8RADENTON, FL 34202 BRADENTON, FL 34202			T TREATHRY BY DERIG WAY BEING REIN BERN BERN BERN BENG FIRE (BEEN LARIN BRING BY BERN HER		
C	OO NOT WRITE		CE	01302006 No Chg-LLC	
6215 LOR	6. Name and Address of Current I O, ANTHONY J RAINE ROAD FON, FL 34202	Registered Agent	-	DO NOT WRITE IN THIS SPACE	
	e named entity submits this statement for tlons of registered ag <i>cnt</i> .	the purpose of changing its register	ed office or register	ed agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name at registered agent a	nd the flapplicable (NOTE: Registere	d Agent signature required	when reinstating! OATE	
F	iling Fee is \$50.00 ue by May 1, 2006			,	
B. TWLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBEI MGRM SCHROEDER-MANATEE RANCH 6215 LORRAINE RD. BRADENTON, FL 34202				
TITLE NAME STREET ADDRESS CATY-ST-IP				U00000419097 02/14/06-80034-006 5 5.00	
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
THICE NAME STREET ADDRESS GITY-ST-ZIP					

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I turther 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 received or tuestee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MINUTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE