## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP

Jul 17, 2006 08:00 AM Secretary of State DOCUMENT # L02000023676 1. Entity Name BOY MANAGEMENT, LLC Principal Place of Business Mailing Address 410 CALOOSA DRIVE 410 CALOOSA DRIVE LABELLE, FL 33935 LABELLE, FL 33935 07122006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 82-0563427 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BOY, JOHN B JR 410 CALOOSA DRIVE LABELLE, FL 33935 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) U00000570867 Filing Fee is \$50.00 Due by September 6, 2006 07/18/06~80013-015 50.00 9. MANAGING MEMBERS/MANAGERS MGRM TITLE NAME BOY, JOHN B JR 410 CALOOSA DRIVE STREET ADDRESS CITY-ST-ZIP LABELLE, FL 33935 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

**FILED** 

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.