

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 23, 2005 08:00 AM
Secretary of State

DOCUMENT #L02000026478

1. Entity Name
BANNERMAN'S, L.L.C.



Principal Place of Business
**6800 THOMASVILLE ROAD
TALLAHASSEE, FL 32312**

Mailing Address
**8976 EAGLES RIDGE DRIVE
TALLAHASSEE, FL 32312**

DO NOT WRITE IN THIS SPACE



03252005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
13-4216217

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GOLDBERG, STUART E
2039 CENTRE POINTE BLVD. SUITE 201
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 *Keith Eierhart* **Keith Eierhart Manager**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/2/05
DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
JOHNSON, JAMES S.
8976 EAGLES RIDGE DRIVE
TALLAHASSEE, FL 32312**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
JOHNSON, KAREN B
8976 EAGLES RIDGE DRIVE
TALLAHASSEE, FL 32312**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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05/23/05-80012-003 55.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Keith Eierhart* **Keith Eierhart Manager**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

5/2/05 **850-668-8800**
Date Daytime Phone #