2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jun 16, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # L02000028 ED REIMBURSEMENT STR		06-16-2006 90001 017 ****50.00						
Principal Place of Business Mailing Address 3497 OAK KNOLL POINT 3497 OAK KNOLL POINT LAKE MARY, FL 32746 LAKE MARY, FL 32746					1,499,411,411		II	PAG 111 1GB)	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			06122006	Chg-LLC	CR2E083 (11/05)		
City & State		City & State		4. FEI Numbe 01-0750		No	oplied For ot Applicable		
Zip	Country	Zip	Zip Country		5. Certificate	of Status Desired	☐ \$5.00 Add Fee Require		
	6. Name and Address of Current	Registered Agent		Nama	7. Name and	Address of New R	legistered Agent		
PENINSULA REGISTERED AGENTS, INC.					Name Street Address (P.O. Box Number is Not Acceptable)				
	·			City			FL Zip Cod	e	
	named entity submits this statement fo ions of registered agent.	r the purpose of changing its	register	ed office or regist	ered agent, or both	n, in the State of Flo	orida. I am familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOT	E: Registere	d Agent signature requir	red when reinstating)		DATE		
					•				
Fil Due l	ing Fee is \$50.00 by September 6, 2006						e check payable to a Department of State	e	
Due i	Dy September 6, 2006 MANAGING MEMBE		10.				Department of State		
9.	MANAGING MEMBE	RS/MANAGERS	īmu	ı		ADDITIONS	Department of State CHANGES Change	e Addition	
Due i	Dy September 6, 2006 MANAGING MEMBE		TITU Nam Stre	ı	a Plantation	ADDITIONS	Department of State CHANGES Change		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBE CEO NUTT, WILLIAM G 3497 OAK LEVOLL POINT LAKE MARY; FL 32746 COB		TITU NAM STRE CITY	EET ADDRESS 768	Plantation	ADDITIONS	Department of State		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE CEO NUTT, WILLIAM G 3497 OAK LEVOLL POINT LAKE MARY, FL 32746 COB ADAMS, JIM	☐ Delete	TITLE NAM STRE CITY TITLE NAM	E EET ADDRESS 76 C	a Plantation	ADDITIONS	CHANGES Change South	Addition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBE CEO NUTT, WILLIAM G 3497 OAK LEVOLL POINT LAKE MARY; FL 32746 COB	☐ Delete	TITLE NAM STRE CITY TITLE NAM STRE	EET ADDRESS 768	Plantation	ADDITIONS	CHANGES Change South	Addition	
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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:	ili Q1	with	Williams. No	لم سر	12/06	40)-833-8680
	SIGNATURE AND TYPED OR PRINTED NAME OF		MEMBER, MANAGER, OR AUTHORIZE	D REPRESENTATIVE	Date	Daytime Phone #