## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L02000032383**

TALLBACKA PROPERTIES, LLC

Principal Place of Business

309 E. OSCEDA STREET #102 STUART, FL 34994

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## **FILED** Jul 31, 2006 08:00 AM **Secretary of State**



DO NOT WRITE IN THIS SPACE

03292006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 56-2306060

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TALLBACKA, ERIK J 2167 NW PINE LAKE DR STUART, FL 34994

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

Date

Daytime Phone ∉

<ol> <li>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.</li> </ol>			
SIGNATURE	Signature, typed or printed name of registered againt and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 / Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ERIK, TALLBACKA J 2167 NW PINE LAKE DRIVE STUART, FL 34994		U00000572982
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•		08/01/06-80008-011 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY- ST- ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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.			