## **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

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## DOCUMENT # L02000032864

1. Entity Name THE SANCTUARY, LLC



04-12-2006 90022 045 \*\*\*\*50.00

**FILED** 

Apr 12, 2006 8:00 am Secretary of State

Principal Place of Business

Mailing Address

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

741 NORTHEAST THIRD STREET

P.O. BOX 1057

SUITE #1

OCALA, FL 34470 US

OCALA, FL 34478 US



03232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For	
54-2084606	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

BENTON, MELISSA 11521 SE 1ST STREET RD SILVER SPRINGS, FL 34488

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		11110 017102
	named entity submits this statement for the purpose of char- tions of registered eigent.	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature Typed or punited mane of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating) DATE
	iling Fee is \$50.00 ue by May 1, 2006	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANDREWS, LAN 7974 SE 12TH CIR OCALA, FL 34480	
NAME STREET ADDRESS GITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
FITLE NAME STREET ADDRESS CITY-ST ZIP		
NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby indicated	tion this report is true and accurate and that my signature s	qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath; that I am a managing member or manager of the scute this report as required by Chapter 608, Florida Statutes.