

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033491

FILED
Apr 02, 2006
Secretary of State

Entity Name: SUSQUEHANNA HOLDING & INVESTMENTS, LLC

Current Principal Place of Business:

934 LAKE DESTINY ROAD
SUITE D
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

934 LAKE DESTINY ROAD
SUITE D
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 57-1141346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKWELDER, EDWIN F MR
934 LAKE DESTINY ROAD
SUITE D
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BLACKWELDER, EDWIN F MR
Address: 934 LAKE DESTINY ROAD - SUITE D
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MEMB () Change (X) Addition
Name: BLACKWELDER, ANITA S MRS.
Address: 3669 WATERCREST DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: MEMB () Change (X) Addition
Name: BLACKWELDER, MITCHELL A MR.
Address: 2369 PARK VILLAGE PLACE
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: EDWIN F. BLACKWELDER

MR

04/02/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date