2006 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

DOCUMENT # L02000035234 1. Entity Name TRIPLE S CATTLE COMPANY, LLC

Principal Place of Business

Mailing Address

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

24055 SR 60

VERO BEACH, FL 32966

1925 LAKESIDE DR ORLANDO, FL 32803

FILED Jan 11, 2006 08:00 AM Secretary of State



01082006 No Chg-LLC

CR2E083 (11/05)

1000	€E OO	B -1 -1001
92-0179570		Not Applicable
4. FEI Number	<u>L</u>	Applied For

5. Certificate of Status Desired

Fee Required

6.	Name	and	Αd	dre	322	O.	1 (Cui	161	и	Reg	istered	Agent
			-	-					_				

GRANTHAM, H. VARLEY 1925 LAKESIDE DR ORLANDO, FL 32803

SIGNATURE

DO NOT WRITE IN THIS SPACE

-2006

Daytime Phone #

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. (am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE
Fi	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAĞERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRANTHAM, H. VARLEY 1925 LAKESIDE DR ORLANDO, FL 32803		000000332404 01/12/06-80011-008 56.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U)/12/Ub=80011-008 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby indicated limited list	Certify that the information supplied with this filling does not don this report is true and accurate and that my signature ability company or the receiver or trustee empowered to ex	qualify for the exemptions contained in Chapter 1 shall have the same legal effect as if made under ecute this report as required by Chapter 608, Flori-	 Florida Statutes. I further certify that the information path; that I am a managing member or manager of the da Statutes.