

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 19, 2006 08:00 AM
Secretary of State**

DOCUMENT # L03000000717

1. Entity Name
BELLE EPOQUE LLC



Principal Place of Business
**5505 DATIL PEPPER RD
ST. AUGUSTINE, FL 32086**

Mailing Address
**5505 DATIL PEPPER RD
ST. AUGUSTINE, FL 32086**



01172006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0488292

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FERREOL, ROLAND MICHEL
5505 DATIL PEPPER RD
ST. AUGUSTINE, FL 32086**

**DO NOT WRITE
IN THIS SPACE**

7. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

8. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
FERREOL, ROLAND M
5505 DATIL PEPPER RD.
SAINT AUGUSTINE, FL 32086**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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000000390948
01/24/06-80021-001 \$0.00

**DO NOT WRITE
IN THIS SPACE**

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 605, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED

ROLLING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DATE

Daytime Phone #

[Signature] **Roland M FERREOL** **01/17/06** **904-794-4037**