


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000002965</b> 1. Entity Name <b>CONNER FAMILY PROPERTIES, LLC</b>	
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Principal Place of Business <b>5379 HUNTERS LAKE ROAD #2 SPRING HILL, FL 34606</b>	Mailing Address <b>5379 HUNTERS LAKE ROAD #2 SPRING HILL, FL 34606</b>
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04272006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>16-1652336</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**CONNER, MICHAEL D  
5379 HUNTERS LAKE ROAD  
#2  
SPRING HILL, FL 34606**

**DO NOT WRITE  
IN THIS SPACE**

8. 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 reissuing)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONNER, MICHAEL D 5379 HUNTERS LAKE ROAD #2 SPRING HILL, FL 34606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONNER, THELMA T 5379 HUNTERS LAKE ROAD #2 SPRING HILL, FL 34606
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05/12/06-80020-007 50.00

**DO NOT WRITE  
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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.

**SIGNATURE:**

*Thelma T. Conner, Managing Member* 4-27-2006 352-683-032

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

Date

Daytime Phone #