


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000012226 1. Entity Name PEACHLAND, LLC		
Principal Place of Business 1133 BAL HARBOUR BLVD., SUITE 1129 PUNTA GORDA, FL 33950		Mailing Address 1133 BAL HARBOUR BLVD., SUITE 1129 PUNTA GORDA, FL 33950
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BEVIS, J. LYN 1133 BAL HARBOUR BLVD., SUITE 1129 PUNTA GORDA, FL 33950		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 _____ <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BEVIS, J. LYN 1133 BAL HARBOR BLVD SUITE 1129 PUNTA GORDA, FL 33950	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BISHP, BRAD 1133 BAL HARBOR BLVD SUITE 1129 PUNTA GORDA, FL 33950	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <i>J. Lyn Bevis</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> 4/12/06		



01052006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 26-0066996	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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04/25/06 80021 000 50.00

**DO NOT WRITE
IN THIS SPACE**