

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022061

Entity Name: SISSON MEADOWS, LLC

FILED
Apr 14, 2006
Secretary of State

Current Principal Place of Business:

5401 RIVEREDGE DRIVE
TITUSVILLE, FL 32780

New Principal Place of Business:

5095 S WASHINGTON AVE
201
TITUSVILLE, FL 32780

Current Mailing Address:

5401 RIVEREDGE DRIVE
TITUSVILLE, FL 32780

New Mailing Address:

5095 S. WASHINGTON AVE
201
TITUSVILLE, FL 32780

FEI Number: 48-0607906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOLITOR, ROGER J
5401 RIVEREDGE DRIVE
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

MOLITOR, ROGER J
5095 S. WASHINGTON AVE
201
TITUSVILLE, FL 32780 US

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: ROGER J. MOLITOR

04/14/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MOLITOR, ROGER J
Address: 5401 RIVEREDGE DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: MGRM () Delete
Name: SIMMS, DON
Address: 4825 BUSINESS CENTRE BLVD. STE. C-1
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MOLITOR, ROGER J
Address: 5095 S. WASHINGTON AVE STE 201
City-St-Zip: TITUSVILLE, FL 32780

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

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: ROGER J MOLITOR

MGRM

04/14/2006

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