

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000023203

1. Entity Name
MAGNOLIA INVESTORS, LLC



Principal Place of Business

**1101 NORTH LAKE DESTINY ROAD, SUITE 225
MAITLAND, FL 32751**

Mailing Address

**1101 NORTH LAKE DESTINY ROAD, SUITE 225
MAITLAND, FL 32751**



01102006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0088348

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MCMULLEN, JACK K
301 E. PINE STREET, SUITE 1400
ORLANDO, FL 32801**

**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 reinstating)

DATE

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

**U00000493227
04/19/06-00097-007 \$5.00**

9. MANAGING MEMBERS/MANAGERS

TITLE	D
NAME	NOGA, GEORGE K
STREET ADDRESS	1101 N. LAKE DESTINY RD., #225
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

GEORGE NOGA

Date

Daytime Phone #

3/31/06 407-875-0075