


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000030956</b> 1. Entity Name TREASURE BAY HOUSE TOO, LLC	
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Principal Place of Business 1105 NORTH JACKADEE POINT INVERNESS, FL 34453 US	Mailing Address 1105 NORTH JACKADEE POINT INVERNESS, FL 34453 US
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**DO NOT WRITE IN THIS SPACE**



01302006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 52-2414225	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  CEPARANO, JOHN J 2450 NORTH CITRUS HILLS BOU HERNANDO, FL 34442
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**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**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SUNBERG, KIM S 1105 NORTH JACKADEE POINT INVERNESS, FL 34453
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HANNAH, DEBRA 1105 NORTH JACKADEE POINT INVERNESS, FL 34453
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03/21/06-80047-020 150.00

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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:** William J. Ceparano 3/11/06 (352) 724-5732  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #