## **2006 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT** DOCUMENT # L03000040010

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

1. Entity Name HAMPTON MANOR AT DEERWOOD, LLC

Principal Place of Business Mailing Address

6. Name and Address of Current Registered Agent



## DO NOT WRITE IN THIS SPACE

3056 SW 41ST LANE

OCALA, FL 34474

04282008 No Chg-LLC CR2E083 (11/05)

4, FEI Number Applied For 20-0399304 Not Applicable

\$5.00 Additional 5. Certificate of Status Desired Fee Required

KAUFFMAN, JAY E 6526 CENTRAL AVE. ST. PETERSBURG, FL 33707

3056 SW 41ST LANE

OCALA, FL 34474

SIGNATURE:

## 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	Jay Aguffman Signature, typed or printed name of registered agent and bile if applicable	(NOTE, Registered Agent signature required when reinstating)	4-28-06
Filing Fee is \$50.00 Due by May 1, 2006			
9,	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOHNSEN, PEDER 3056 SW 41ST LANE OCALA, FL 34474		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000550325 05/13/06-80055-018 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		INT	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling 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.			