


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000045593		
1. Entity Name GRACEYOGA, LLC		
Principal Place of Business 569 CENTRAL PARKWAY UNIT 105 STUART, FL 34994 US	Mailing Address P.O. BOX 1152 HOBE SOUND, FL 33475 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent COFFEY, JAMES 8255 SE GOVERNORS WAY HOBE SOUND, FL 33455		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) DATE</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COFFEY, MARGARET G MGRM 569 SE CENTRAL PARKWAY STUART, FL 34994	DO NOT WRITE IN THIS SPACE
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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: <u>Margaret G. Coffey, Manager</u>		Date: <u>1/11/06</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Daytime Phone #</small>



01082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-0406437

Applied For
Not Applicable

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

1100000395111
01/25/06-80006-023 50.00