

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049428

Entity Name: STEPHEN A. UNLAND, LLC

FILED  
Jan 11, 2006  
Secretary of State

**Current Principal Place of Business:**

2102 TRUMAN AVE  
ALVA, FL 33920

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3105  
NORTH FORT MYERS, FL 33918

**New Mailing Address:**

2102 TRUMAN AVENUE  
ALVA, FL 33920

FEI Number: 20-0419317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

UNLAND, STEPHEN A  
2339 WESTWOOD RD.  
N. FT. MYERS, FL 33917 US

**Name and Address of New Registered Agent:**

UNLAND, STEPHEN A  
2102 TRUMAN AVENUE  
ALVA, FL 33920 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: STEPHEN A UNLAND

01/11/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: UNLAND, STEPHEN A  
Address: 2338 WESTWOOD RD  
City-St-Zip: N. FORT MYERS, FL 33917

Title: MGR ( ) Delete  
Name: UNLAND, STEPHEN A  
Address: 2102 TRUMAN AVE  
City-St-Zip: ALVA, FL 33920

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: UNLAND, STEPHEN A  
Address: 2102 TRUMAN AVENUE  
City-St-Zip: ALVA, FL 33920

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: STEPHEN A UNLAND

MGR

01/11/2006

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