2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State
05-05-2006 90022 049 ****55.00

DOCUMENT # L03000050701

1. Entity Name
CHRIS FOUNTAINE,LLC

Principal Place of Business	Mailing Address
9014 BOLTON AVENUE HUDSON FL 34667	9014 BOLTON AVENUE HUDSON FL 34667

1st MOORE CR2E083 (10/05)

2. Principal Place of Business	3. Mailing Address
9014 Bolton Ave	9014 Bolton Ave
Suite, Apt. #, etc.: Lot # 56	Suite, Apt. #, etc.: Lot # 56
City & State: Hudson, FL.	City & State: Hudson, FL
Zip: 34667 Country: Pasco	Zip: 34667 Country: Pasco

4. FEI Number 20-0482738 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FOUNTAINE, CHRIS
9014 BOLTON AVENUE
HUDSON FL 34667

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 Chris Fountaine Chris Fountaine 4-5-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	☐ Delete
NAME	FOUNTAINE, CHRIS	
STREET ADDRESS	9014 BOLTON AVENUE	
CITY-ST-ZIP	HUDSON FL 34667	
TITLE	MGRM	☐ Delete
NAME	GEE, BETHLYN M	
STREET ADDRESS	9014 BOLTON AVENUE	
CITY-ST-ZIP	HUDSON FL 34667	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	9014 Bolton Ave. #56	
CITY-ST-ZIP		
TITLE	Mgrm	☒ Change ☐ Addition
NAME	Bethlyn M. Fountaine	
STREET ADDRESS	9014 Bolton Ave #56	
CITY-ST-ZIP	Hudson, FL 34667	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Chris Fountaine 4-5-06 727-389-1634
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

WISCONSIN CERTIFICATE OF VITAL RECORD

ATTACHMENT 2004/4302

#L03000050701

Type or print. Use permanent black ink. No whiteout or erasures.

Reserved for Vital Statistics

STATE OF WISCONSIN
DEPARTMENT OF HEALTH AND FAMILY SERVICES
ORIGINAL CERTIFICATE OF MARRIAGE

STATE FILE DATE

STATE FILE NUMBER 39-102

GROOM

Field	Value
1. Groom - Name (First, Full Middle, Current Last)	Chris Jay FOUNTAINE
1b. Birth Surname	FOUNTAINE
2. Date of Birth	February 9, 1965
3a. Place of Residence - State	Florida
3b. County	Pasco
3c. City, Village or Township	Hudson
4. State of Birth	Wisconsin
5. Father - Name (First, Middle, Birth Surname)	Ronald Lee Fountaine
6. Mother - Name (First, Middle, Birth Surname)	Charlotte Marie Pierce

BRIDE

Field	Value
7a. Bride - Name (First, Full Middle, Current Last)	Bethlyn Mae Gee
7b. Birth Surname	Gee
8. Date of Birth	December 10, 1953
9a. Place of Residence - State	Florida
9b. County	Pasco
9c. City, Village or Township	Hudson
10. State of Birth	Ohio
11. Father - Name (First, Middle, Birth Surname)	Richard Dallas Gee
12. Mother - Name (First, Middle, Birth Surname)	Edna Mae Carothers

WE HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AND THAT WE ARE FREE TO MARRY UNDER THE LAWS OF THIS STATE.

13. Groom's Signature (Sign before ceremony): Chris Jay Fountaine

14. Bride's Signature (Sign before ceremony): [signature]

LICENSE

THE ISSUE OF THIS LICENSE SHALL NOT BE DEEMED TO REMOVE OR DISPENSE WITH ANY LEGAL DISABILITY, IMPEDIMENT OR PROHIBITION RENDERING MARRIAGE BETWEEN THE PARTIES ILLEGAL. THIS LICENSE IS VALID FOR 30 DAYS AFTER THE DATE ISSUED BY THE COUNTY CLERK.

Field	Value
15. License Number	75
16. Issued by County Clerk	Robert D. Kunkel
Signature	Robert D. Kunkel
17. Date Issued	June 17, 2005
18. Issuing County	Lincoln

CERTIFICATION — OFFICIANT

Field	Value
19. Date of Marriage	06-18-05
20a. Where Married - County	Lincoln
20b. City, Village or Township	Merrill (Township ☒)
21. Officiant Signature (I certify that the above-named persons were married before me on the above-mentioned date.)	Rev. William P. Hohman
22. Adult Witness to Ceremony - Signature	[signature]
23. Officiant Name (Print or type)	Rev. William P. Hohman
24. Adult Witness to Ceremony - Signature	Cynthia R. Wenzel
25a. Officiant Title	Pastor
25b. Officiant Mailing Address	610 East 1st St Merrill WI 54452
26. Registrar - Signature	[signature], Deputy
27. Date Received by Local Registrar	June 21, 2005

CONFIDENTIAL INFORMATION / ITEMS 31 AND 32 ARE FOR STATISTICAL PURPOSES ONLY (ss 69.20(2), 69.14, 42 usc 666(a)(13)). THE DATA BELOW THIS LINE MUST NOT BE PERMANENTLY ON FILE IN THE LOCAL REGISTRAR'S OFFICE.

I certify that this document contains a true and correct reproduction of facts on file with the Wisconsin Vital Records Office.

Jolene Callahan
JOLENE CALLAHAN
LINCOLN COUNTY REGISTER OF DEEDS

5144446

Date Issued: October 28, 2005

LOCAL REGISTRAR — WISCONSIN

STATE OF WISCONSIN

MAY NOT BE USED AS A CERTIFIED COPY OF A MARRIAGE CERTIFICATE/LICENSE

DEPARTMENT OF HEALTH AND FAMILY SERVICES
Division of Health Care Financing
HCF 5062 (Rev. 05/03)

STATE OF WISCONSIN
Chapter 765, Wis. Stats.

STATE OF WISCONSIN
TESTAMENT TO THE MARRIAGE OF

Chris Fountain
SIGNATURE – Groom's Married Name

Betsey M. Fountain
SIGNATURE - Bride's Married Name

SIGNATURE – Groom's Pre-married Name (if different)

Betsey M. Gee
SIGNATURE - Bride's Pre-married Name (if different)

I officiated at the marriage of the above parties

on June 18th (Month/Day), 2005 (Year) at Merrill (City, Village or Township), Wisconsin.

Marriage License Number 75

Robert D. Kunkel
SIGNATURE – County Clerk

Lincoln County (County), Wisconsin

Rev. William P. Hoh
SIGNATURE – Officiant

06-18-05
Date Signed

(See reverse for information on the use of this form)

ATTACHMENT 20094302
#L03000050101

ATTACHMENT

20044302

#L03000050701

I, Chris Fountaine, submit 10% ownership of Chris Fountaine L.L.C. to Bethlyn M. Gee, making her a member of my Limited Liability Company, on the 12th day, of April, 2004.

Chris Fountaine 4-12-04

Bethlyn Gee 4-12-04

STATE OF Florida
COUNTY OF Pasco
The foregoing instrument, Ltr.
(description of instrument)
was acknowledged before me this 12th day of April 2004
by CHRIS FOUNTAINE + BETHLYN GEE
(name of person acknowledged)
☐ who is personally known to me, or
☑ who has produced Driver as identification
(type of identification)

Cathy E. Pheiffer
NOTARY

NOTARY PUBLIC
CATHY E. PHEIFFER
Notary Public, State of Florida
My comm. expires Mar. 25, 2007
No. DD196372