

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007031

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** TERRA FIRMA SPECIALTIES, L.L.C.

**Current Principal Place of Business:**

706 EDGE ST  
FT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

706 EDGE ST  
FT WALTON BEACH, FL 32548

**New Mailing Address:**

**FEI Number:** 20-0665462

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAUGHT, BRUCE A  
385 HIGHWAY 98 E, STE 220  
DESTIN, FL 32541 US

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

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:**

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: STRACKER, PAUL  
Address: 706 EDGE ST  
City-St-Zip: FT WALTON BEACH, FL 32548

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: STREACKER, PAUL  
Address: 706 EDGE ST  
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: MGRM ( ) Change (X) Addition  
Name: STREACKER, PAM  
Address: 706 EDGE ST.  
City-St-Zip: FT. WALTON BEACH, FL 32548

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** PAUL STREACKER

MGRM

04/27/2005

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