FILED
May 01, 2006 08:00 AM
Secretary of State

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000022164

1. Entity Name
STEINHATCHEE RIVER PARTNERS, LLC

Principal Place of Business	Mailing Address
414 RIVERSIDE DRIVE STEINHATCHEE, FL 32359	414 RIVERSIDE DRIVE STEINHATCHEE, FL 32359

DO NOT WRITE IN THIS SPACE

05012006 No Chg-LLC CR2E063 (11/05)

4. FEI Number
26-0081745
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MITCHELL, HENRY FRED JR
414 RIVERSIDE DRIVE
STEINHATCHEE, FL 32359

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MITCHELL, HENRY F JR.
STREET ADDRESS	414 RIVERSIDE DRIVE
CITY-ST-ZIP	STEINHATCHEE, FL 32359
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	

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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 605, Florida Statutes.

SIGNATURE: Henry F. Mitchell 5-1-06 352-498-2222
SIGNATURE AND TYPED OR PRINTED NAME OF MGNG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #