2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L04000024823

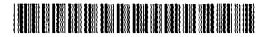
1. Entity Name KAFFEEHAUS BAKERY, LLC

FILED Mar 23, 2006 08:00 AM Secretary of State

Principal Place of Business

10234 SARAH FRANCES LANE JACKSONVILLE, FL 32220 Mailing Address

10234 SARAH FRANCES LANE JACKSONVILLE, FL 32220



02062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 54-2154354 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulard

6. Name and Address of Current Registered Agent

SANDERS, ROGER D 10234 SARAH FRANCES LANE JACKSONVILLE, FL 32220

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	named entity submits this statement for the purpose of cha- tions of registered agent.	nging its registered office or registered agent, or bot	h, In the State of Florida. I am familiar with, and accep
SIGNATURE_			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi Di	iling Fee is \$50.00 ue by May 1, 2006		Hunnun478398 04/89/06-80004-008 50.0 0
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	SANDERS, ROGER D	1	
STREET ADDRESS	10234 SARAH FRANCES LANE	. .	

CITY-ST-ZIP JACKSONVILLE, FL 32220 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 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 it made under cath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/19/06

Daytime Phone #