

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026898

Entity Name: STYSTAK HOLDINGS, LLC

FILED
Jan 07, 2006
Secretary of State

Current Principal Place of Business:

10705 SE 151 ST.
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

10705 SE 151 ST.
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 61-1471096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAKENBORG, ELIZABETH
10705 SE 151 ST.
SUMMERFIELD, FL 34491 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/MANAGERS:

Title: MGR () Delete
Name: STAKENBORG, ELIZABETH
Address: 10705 SE 151 ST.
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGR () Delete
Name: STAKENBORG, CORNELIS F
Address: 10705 SE 151 ST.
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGR () Delete
Name: STYDAHAR, DAVID F
Address: 4861 SE 44TH AVE RD
City-St-Zip: OCALA, FL 34480

Title: MGR () Delete
Name: STYDAHAR, DOREEN L
Address: 4861 SE 44TH AVE RD
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: STYDAHAR, DAVID F
Address: 1644 FERNSTONE DRIVE NW
City-St-Zip: ACWORTH, GA 30101

Title: MGR (X) Change () Addition
Name: STYDAHAR, DOREEN L
Address: 1644 FERNSTONE DRIVE NW
City-St-Zip: ACWORTH, GA 30101

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: ELIZABETH STAKENBORG

MGR

01/07/2006

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