2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000028913

1. Entity Name
KOVACS LAND, LLC

Principal Place of Business	Mailing Address
1723 WREN WAY NICEVILLE, FL 32578	1723 WREN WAY NICEVILLE, FL 32578

DO NOT WRITE IN THIS SPACE

06072006No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-1003998	Not Applicable

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

6. Name and Address of Current Registered Agent

PITELL, LISA
4400 E HWY 20
SUITE 211
NICEVILLE, FL 32578

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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

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

Filing Fee is $50.00
Due by September 6, 2006

U00000569853
07/13/06-80005-022 50.00

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	KOVACS, ENDRE
STREET ADDRESS	1723 WREN WAY
CITY-ST-ZIP	NICEVILLE, FL 32578

TITLE	
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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 608, Florida Statutes.

SIGNATURE: 6/21/06   (850) 499-1025

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #