

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90011 029 ****50.00

DOCUMENT # L04000029279

1. Entity Name
INFINITY REALTY & DEVELOPMENT, LLC



Principal Place of Business
275 WEST MAIN STREET
LAKE BUTLER, FL 32054

Mailing Address
275 WEST MAIN STREET
LAKE BUTLER, FL 32054

DO NOT WRITE IN THIS SPACE



03222006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1090413

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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IN THIS SPACE**

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 May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FORTNER, CHRISTOPHER R
STREET ADDRESS	275 WEST MAIN STREET
CITY-ST-ZIP	LAKE BUTLER, FL 32054
TITLE	S
NAME	CARLTON, PAUL
STREET ADDRESS	275 WEST MAIN STREET
CITY-ST-ZIP	LAKE BUTLER, FL 32054
TITLE	T
NAME	RUSSELL, TIMOTHY L
STREET ADDRESS	275 WEST MAIN STREET
CITY-ST-ZIP	LAKE BUTLER, FL 32054
TITLE	MGR
NAME	FORTNER, ELIZABETH A
STREET ADDRESS	RT 5 BOX 5710
CITY-ST-ZIP	LAKE BUTLER, FL 32054
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 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: *Ch. Fortner*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/23/06

Date

352.258.0588

Daytime Phone #