

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030362

FILED
Aug 07, 2006
Secretary of State

Entity Name: BURNS FAMILY INVESTMENTS, LLC

Current Principal Place of Business:

1561 SANDY SPRINGS DRIVE
ORANGE PARK, FL 32003

New Principal Place of Business:

Current Mailing Address:

1561 SANDY SPRINGS DRIVE
ORANGE PARK, FL 32003

New Mailing Address:

FEI Number: 20-1043165 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BAYLES, LINDA B
1561 SANDY SPRINGS DRIVE
ORANGE PARK, FL 32003 US

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: MRS () Delete
Name: BAYLES, LINDA B
Address: 1561 SANDY SPRINGS DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: MR () Delete
Name: BAYLES, BRAD D
Address: 1561 SANDY SPRINGS DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: MR () Delete
Name: BURNS, BEN A
Address: 2709 TYNE BLVD
City-St-Zip: NASHVILLE, TN 37215

Title: MR () Delete
Name: BURNS, KENT A
Address: 419 SUNNYSIDE DR
City-St-Zip: NASHVILLE, TN 37205

ADDITIONS/CHANGES:

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

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

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

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

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: LINDA B BAYLES

MRS

08/07/2006

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