## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000030376

Address:

City-St-Zip:

POST OFFICE BOX 548

OCALA, FL 344780548

FILED Apr 27, 2006 Secretary of State

Entity Name: THOROUGHBRED HOSPITALITY AT BAY LAUREL CENTER, LLC

**New Principal Place of Business: Current Principal Place of Business:** 1101 SE 12TH STREET OCALA, FL 34471 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 548 OCALA, FL 344780578 US FEI Number: 52-2442144 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEPASQUALE, KENNETH R POST OFFICE BOX 548 OCALA, FL 344780548 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: ADDITIONS/CHANGES: () Delete Title: () Change () Addition DEPASQUALE, KENNETH R Name: Name: Address: POST OFFICE BOX 548 Address: City-St-Zip: OCALA, FL 344780548 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: DEPASQUALE, KAREN R 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: KENNEHT DEPASQUALE MGR 04/27/2006