


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 21, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000040631**

1. Entity Name  
**DANSHER, L.L.C.**



Principal Place of Business <b>2187 TROON COURT          SPRING HILL, FL 34606</b>	Mailing Address <b>2187 TROON COURT          SPRING HILL, FL 34606</b>
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**DO NOT WRITE IN THIS SPACE**



04152006 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>38-3692409</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**SHERIDAN, EUGENE F SR.  
 2187 TROON COURT  
 SPRING HILL, FL 34606**

**DO NOT WRITE IN THIS SPACE**

8. The above named entry 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$50.00  
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SHERIDAN, EUGENE F SR. 2187 TROON COURT SPRING HILL, FL 34606
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 05/04/06-80012-002 50.00

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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 508, Florida Statutes.

SIGNATURE: *Eugene F Sheridan MGR* **4-17-06**

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