

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048438

Entity Name: RALF D WHOOLERY L.L.C.

FILED
Jun 28, 2006
Secretary of State

Current Principal Place of Business:

P O BOX 4661
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

308 BLACK CREEK LODGE ROAD
FREEPORT, FL 32439

Current Mailing Address:

P O BOX 4661
SANTA ROSA BEACH, FL 32459

New Mailing Address:

308 BLACK CREEK LODGE ROAD
FREEPORT, FL 32439

FEI Number: 30-1303158 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:

FARRISH, AUDREY A
804 CHURCHILL BAYOU RD
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: WHOOLERY, RALF D
Address: P O BOX 4661
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WHOOLERY, RALF D
Address: 308 BLACK CREEK ROAD
City-St-Zip: FREEPORT, FL 32439

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: RALF D WHOOLERY

MGR

06/28/2006

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