

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

APPROVED
AND
FILED

06 MAR -1 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC



02082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
43-2060540

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PLETCHER, JOHN J
12226 GARDEN LAKE CIRCLE
ODESSA, FL 33556

**DO NOT WRITE
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
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
PLETCHER, JOHN J
12226 GARDEN LAKE CIRCLE
ODESSA, FL 33556

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

400067456534
03/09/06--01020--001 **200.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

JOHN J Pletcher 2/8/06 813-920-8500