


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000054344
 1. Entity Name
TERRI OSBORN, LLC



Principal Place of Business Mailing Address
4320 LAKE IN THE WOODS DRIVE **4320 LAKE IN THE WOODS DRIVE**
SPRING HILL, FL 34607 US **SPRING HILL, FL 34607 US**

DO NOT WRITE IN THIS SPACE



01092008 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1416873	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
IAN S GIOVINCO, PA
7215 HIAWATHA PARKWAY
SPRING HILL, FL 34606

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OSBORN, TERRI 4320 LAKE IN THE WOODS DRIVE SPRING HILL, FL 34607
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 02/18/06-80018-005 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 608, Florida Statutes.

SIGNATURE:  **Terri Osborn** X **2/30/06** X **362-596-9999**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #