

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058350

FILED
Mar 20, 2006
Secretary of State

Entity Name: WILLACOOCHEE CONCEPTS, L.L.C.

Current Principal Place of Business:

7543 SALEM ROAD
QUINCY, FL 32352

New Principal Place of Business:

Current Mailing Address:

7543 SALEM ROAD
QUINCY, FL 32352

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASLIE, W C
7543 SALEM ROAD
QUINCY, FL 32352 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: MGRM () Delete
Name: MUNROE, WILLIAM D JR
Address: 19 FENTON WOOD DRIVE
City-St-Zip: STERLING, VA 20165

Title: MGRM () Delete
Name: RIDDLE, T. CHARLES
Address: 530 HAVANA HIGHWAY
City-St-Zip: QUINCY, FL 32352

Title: MGRM () Delete
Name: ANDERSON, SAM
Address: 3432 PIEDMONT ROAD, APT. 332
City-St-Zip: ATLANTA, GA 30305

Title: MGRM () Delete
Name: LASLIE, W C
Address: 7543 SALEM ROAD
City-St-Zip: QUINCY, FL 32352

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: W.C. LASLIE

MGRM

03/20/2006

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