


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 28, 2006 8:00 am**  
**Secretary of State**

04-28-2006 90014 018 \*\*\*\*50.00

**DOCUMENT # L04000062706**

1. Entity Name  
**ZF MANAGEMENT COMPANY, LLC**



Principal Place of Business <b>4540 HIGHWAY 20 EAST          NICEVILLE, FL 32578 US</b>	Mailing Address <b>P.O. BOX 5220          NICEVILLE, FL 32578 US</b>
--	---

**DO NOT WRITE IN THIS SPACE**



03032006 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>20-1578731</b>	Applied For Not Applicable
------------------------------------	-------------------------------

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**ZIVAN, JEROME A  
 4540 HIGHWAY 20 EAST  
 NICEVILLE, FL 32578**

**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.

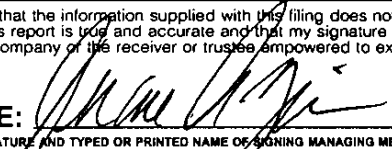
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ZIVAN, JEROME A 4540 HIGHWAY 20 EAST NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VAN DYKE, DORELLA K 4540 HIGHWAY 20 EAST NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**  **Jerome A. Zivan** **4/18/06 8508976430**

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