

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000066648 1. Entity Name DOGWOOD 316, LLC		
Principal Place of Business 1419 E CERVANTES ST PENSACOLA, FL 32501-3436 US	Mailing Address 1419 E CERVANTES ST PENSACOLA, FL 32501-3436 US	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent WESSEL, JOHN R 1419 E. CERVANTES STREET PENSACOLA, FL 32501-3436		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 WESSEL, JOHN R 1419 E. CERVANTES STREET PENSACOLA, FL 325013436	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WESSEL, RUTH J 1419 E CERVANTES STREET PENSACOLA, FL 325013436	
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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: <u>John R. Wessel MGRM</u> <u>JOHN R. WESSEL</u> 04/27/06 (850) 380-5886 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #		



04252006 No Chg-LLC

CR2E083 (11/05)

4. FFI Number
05-0609044

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fees Required

000000550551
05/13/06-80064-017 50.00

**DO NOT WRITE
IN THIS SPACE**