

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072460

Entity Name: COUNTRY COTTAGE, LLC

FILED
Feb 10, 2006
Secretary of State

Current Principal Place of Business:

345 HOMEWOOD AVENUE
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

345 HOMEWOOD AVENUE
DEBARY, FL 32713

New Mailing Address:

P. O. BOX 148
MICAIVILLE, NC 28755

FEI Number: 20-1733138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLICK, JAMES J
112 LAKE AVENUE
ORLANDO, FL 32801 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: CRISTIE, CHERINE M
Address: 345 HOMEWOOD AVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM () Delete
Name: CRISTIE, SHERMAN
Address: 345 HOMEWOOD AVE
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRISTIE, CHERINE M
Address: 345 HOMEWOOD AVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM (X) Change () Addition
Name: CRISTIE, SHERMAN
Address: 345 HOMEWOOD AVE
City-St-Zip: DEBARY, FL 32713

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: CHERINE M. CRISTE

MGRM

02/10/2006

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