

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000073575

1. Entity Name
BONE BOOTH, LLC



Principal Place of Business
C/O BETH GREVENGOOD
451 FLAMINGO AVENUE
NAPLES, FL 34108

Mailing Address
C/O BETH GREVENGOOD
451 FLAMINGO AVENUE
NAPLES, FL 34108



03202006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3728239

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

8. Name and Address of Current Registered Agent

SCHUMANN, RAYMOND L
27200 RIVERVIEW CENTER BLVD., SUITE 103
BONITA SPRINGS, FL 34134

**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
GREVENGOOD, BETH
451 FLAMINGO AVENUE
NAPLES, FL 34108

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

1100001482318
04/11/06 80070-009 50.00

**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 or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-25-06

Date

139-593-0583

Daytime Phone #