2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000076153

1. Entity Name

ROSANNA BANKS LANG LLC

Principal Place of Business

2178 WINDTRACE RD N
NAVARRE FL 32566

Mailing Address

2178 WINDTRACE RD N
NAVARRE FL 32566

2. Principal Place of Business | 3. Mailing Address

Suite, Apt. #, etc. | Suite, Apt. #, etc.

City & State | City & State

Zip | Country | Zip | Country

1st MOORE CR2E083 (10/05)

4. FEI Number 20-1771734 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

LANG, ROSANNA B
2178 WINDTRACE RD N
NAVARRE FL 32566

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. The above named entity submits this statement for the purpose [...] 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 [...] if reinstating) DATE

Make C[...] [...] State

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9. MANAGING MEMBERS/MANAGE[RS] — ADDITIONS/CHANGES

TITLE	MGR		TITLE		☐ Change ☐ Addition
NAME	BANKS LANE, ROSANNA		NAME	U00000422512	
STREET ADDRESS	2178 WINDTRACE RD N		STREET ADDRESS	02/17/06-80020-001 55.00	
CITY-ST-ZIP	NAVARRE FL 32566		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
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CITY-ST-ZIP			CITY-ST-ZIP		
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TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Rosanna B. Lang 1-24-06 850-699-4850