

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077755

**FILED**  
**Mar 15, 2006**  
**Secretary of State**

**Entity Name:** S & B INVESTMENTS OF HERNANDO COUNTY, LLC

**Current Principal Place of Business:**

3821 HENDERSON BOULEVARD  
TAMPA, FL 33629 US

**New Principal Place of Business:**

290 E FORT DADE AVE  
BROOKSVILLE, FL 34601 US

**Current Mailing Address:**

3821 HENDERSON BOULEVARD  
TAMPA, FL 33629 US

**New Mailing Address:**

PO BOX 1483  
BROOKSVILLE, FL 34605 US

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REIBER, SAM I  
3821 HENDERSON BOULEVARD  
TAMPA, FL 33629 US

**Name and Address of New Registered Agent:**

BICKEL, TERRY G  
290 E FORT DADE AVE  
BROOKSVILLE, FL 34601 US

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: TERRY BICKEL

03/15/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TAX DEFERRED EXCHANG, E SERVICES, IN C .  
Address: 3821 HENDERSON BOULEVARD  
City-St-Zip: TAMPA, FL 33629 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: B&S INVESTMENTS LLC,  
Address: 290 E FORT DADE AVE  
City-St-Zip: BROOKSVILLE, FL 34601 US

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: B&S INVESTMENTS LLC

MGRM

03/15/2006

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