


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90032 002 \*\*\*\*50.00

<b>DOCUMENT # L04000078584</b> 1. Entity Name <b>HAAN ENTERPRISES, LLC</b>	
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Principal Place of Business <b>9425 NORTHEAST 307 COURT SALT SPRING, FL 32134</b>	Mailing Address <b>9425 NORTHEAST 307 COURT SALT SPRING, FL 32134</b>
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04152006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>20-1841126</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>HAAN, DANIEL E 9425 NORTHEAST 307 COURT SALT SPRING, FL 32134</b>
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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 HAAN, DANIEL E 9425 NORTHEAST 307 COURT SALT SPRINGS, FL 32134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAAN, NANCY A 9425 NORTHEAST 307 COURT FORT MC COY, FL 32134
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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: Nancy A Haan <sup>29</sup>  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date 4-29-06 Daytime Phone # 352-537-9021