

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089411

FILED  
Jan 30, 2006  
Secretary of State

**Entity Name:** ELLIS FAMILY EMPLOYEES, LLC

**Current Principal Place of Business:**

34 WEST ORANGE STREET  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1879  
TARPON SPRINGS, FL 346881457

**New Mailing Address:**

**FEI Number:** 20-1992623

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HALL, DONALD R  
28050 US HIGHWAY 19 NORTH  
SUITE 402  
CLEARWATER, FL 33761 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: MGR ( ) Delete  
Name: MARTIN, CAROL E  
Address: P. O. BOX 1291  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: MGR (X) Delete  
Name: MARTIN, PAUL W  
Address: P.O. BOX 1291  
City-St-Zip: TARPON SPRINGS, FL 34688

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CAROL E. MARTIN

MGR

01/30/2006

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