2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2006
Secretary of State

DOCUMENT# L04000091559

Entity Name: DEINES ENTERPRISES, LLC

Current Principal Place of Business:

6704 CHERRY PASS
OCALA, FL 34472

New Principal Place of Business:

5100 SE 44TH CIRCLE
OCALA, FL 34480

Current Mailing Address:

6704 CHERRY PASS
OCALA, FL 34472

New Mailing Address:

5100 SE 44TH CIRCLE
OCALA, FL 34480

FEI Number: 52-2448519 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DEINES, CLAYTON A
6704 CHERRY PASS
OCALA, FL 34472 US

Name and Address of New Registered Agent:

DEINES, CLAYTON A
5100 SE 44TH CIRCLE
OCALA, FL 34480 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: _____ 01/17/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DEINES, CLAYTON A
Address: 6704 CHERRY PASS
City-St-Zip: OCALA, FL 34472

Title: MGRM ( ) Delete
Name: DEINES, CHRISTINE M
Address: 6704 CHERRY PASS
City-St-Zip: OCALA, FL 34472

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: DEINES, CLAYTON A
Address: 5100 SE 44TH CIRCLE
City-St-Zip: OCALA, FL 34480

Title: MGRM (X) Change ( ) Addition
Name: DEINES, CHRISTINE M
Address: 5100 SE 44TH CIRCLE
City-St-Zip: OCALA, FL 34480

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: CHRISTINE M DEINES VP 01/17/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date