

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093326

FILED
Sep 05, 2006
Secretary of State

Entity Name: DEAN TRACTOR AND TREE, LLC

Current Principal Place of Business:

8256 LUCENA ST.
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

8256 LUCENA ST.
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 20-1987589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DEAN, TIMOTHY M
8256 LUCENA ST.
NAVARRE, FL 32566 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: DEAN, TIMOTHY M
Address: 8256 LUCENA ST.
City-St-Zip: NAVARRE, FL 32566

Title: MGRM () Delete
Name: DEAN, MARSHALL S
Address: 8256 LUCENA ST.
City-St-Zip: NAVARRE, FL 32566

Title: MGR (X) Delete
Name: DAY, REND EVAN
Address: 8256 LUCENA ST.
City-St-Zip: NAVARRE, FL 32566

Title: MGR () Delete
Name: LOWE, CHRISTOPHER D
Address: 1924 CONSTITUTION DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEAN, TIMOTHY M
Address: 8256 LUCENA ST.
City-St-Zip: NAVARRE, FL 32566

Title: MGR (X) Change () Addition
Name: DEAN, MARSHALL S
Address: 8256 LUCENA ST.
City-St-Zip: NAVARRE, FL 32566

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

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

Title: MGR () Change (X) Addition
Name: MCFEELEY, SUSAN A
Address: 8256 LUCENA STREET
City-St-Zip: NAVARRE, FL 32566 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: TIMOTHY M. DEAN

MGRM

09/05/2006

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