

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 21, 2006
Secretary of State**

DOCUMENT# L05000000391

Entity Name: BAGS OF FLORIDA, LLC

Current Principal Place of Business:

621 E. WASHINGTON ST. SUITE 8
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

621 E. WASHINGTON ST. SUITE 8
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 20-2093733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENCE DRIVE
SUITE 1300
JACKSONVILLE, FL 322025017 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: MATEER, CRAIG C
Address: 621 E. WASHINGTON ST. SUITE 8
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES:

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: CRAIG MATEER

MGR

03/21/2006

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