

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001828

Entity Name: LB, LLC

FILED  
Jan 18, 2006  
Secretary of State

**Current Principal Place of Business:**

4281 MONTALVO COURT  
NAPLES, FL 34109

**New Principal Place of Business:**

28536 CHIANTI TERRACE  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

P.O. BOX 110188  
NAPLES, FL 341080104

**New Mailing Address:**

P.O. BOX 110188  
NAPLES, FL 34108

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NOVATT, JEFF M ESQ.  
C/O CHEFFY, PASSIDOMO, ET AL  
821 FIFTH AVENUE SOUTH, SUITE 201  
NAPLES, FL 34102 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: CARTER, PATSY D TRUSTEE  
Address: P.O. BOX 1101881  
City-St-Zip: NAPLES, FL 341080104

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CARTER, PATSY D TRUSTEE  
Address: P.O. BOX 110188  
City-St-Zip: NAPLES, FL 34108

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: PATSY D CARTER

MGR

01/18/2006

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