

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003355

FILED
Apr 17, 2006
Secretary of State

Entity Name: HUNTER HOUSE ASSOCIATES, LLC

Current Principal Place of Business:

6445 S CHICKASAW TRAIL
SUITE 270
ORLANDO, FL 32829

New Principal Place of Business:

Current Mailing Address:

6445 S CHICKASAW TRAIL
SUITE 270
ORLANDO, FL 32829

New Mailing Address:

FEI Number: 84-1666655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, TIMOTHY R
6445 S CHICKASAW TRAIL
SUITE 270
ORLANDO, FL 32829 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: HUNTER, TIMOTHY R
Address: 6445 S CHICKASAW TRAIL, SUITE 270
City-St-Zip: ORLANDO, FL 32829

Title: MGRM () Delete
Name: HUNTER, LOIS R
Address: 6445 S CHICKASAW TRAIL, SUITE 270
City-St-Zip: ORLANDO, FL 32829

Title: MGRM () Delete
Name: HUNTER, JEREMIAH C
Address: 6445 S CHICKASAW TRAIL, SUITE 270
City-St-Zip: ORLANDO, FL 32829

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

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

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

ADDITIONS/CHANGES:

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

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

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

Title: MGRM () Change (X) Addition
Name: HUNTER, JOSHUA L
Address: 6445 S CHICKASAW TRAIL, SUITE 270
City-St-Zip: ORLANDO, FL 32829

Title: MGRM () Change (X) Addition
Name: HUNTER, ESTHER H
Address: 6445 S CHICKASAW TRAIL, SUITE 270
City-St-Zip: ORLANDO, FL 32829

Title: MGRM () Change (X) Addition
Name: HUNTER, DANIEL T
Address: 6445 S CHICKASAW TRAIL, SUITE 270
City-St-Zip: ORLANDO, FL 32829

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: LOIS R HUNTER

MGRM

04/17/2006

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