




FILED
Jun 30, 2006 8:00 am
Secretary of State

04-24-2006 90049 031 ****50.00

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000007933			
1. Entity Name MR. TEEZ LLC			
Principal Place of Business 6419 NEWBERRY RD GAINESVILLE, FL 32605 US		Mailing Address 6419 NEWBERRY RD GAINESVILLE, FL 32605 US	
2. Principal Place of Business Mr. Teez, LLC		3. Mailing Address 3215 SW 35th Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Gainesville FL		4. FEI Number 9811279110	
Zip 32608		Country USA	
5. Certificate of Status Desired <input type="checkbox"/>		6. Additional Fee Required <input type="checkbox"/>	
6. Name and Address of Current Registered Agent McCLAIN, JULIAN C 1814 SW 16TH ST. GAINESVILLE, FL 32608		7. Name and Address of New Registered Agent Name: Chris Kennedy Street Address (P.O. Box Number is Not Acceptable): 3241 SW 18th Dr. City: Gainesville State: FL Zip Code: 32608	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  DATE: 4/15/06 <small>Signature, name of person or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.)</small>			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE: MGRM NAME: McCLAIN, JULIAN C STREET ADDRESS: 1814 SW 16TH ST CITY-ST-ZIP: GAINESVILLE, FL 32608 <input checked="" type="checkbox"/> Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: MGRM NAME: HEBEISEN, AARON M STREET ADDRESS: 6312 SW 88TH COURT CITY-ST-ZIP: GAINESVILLE, FL 32608 <input type="checkbox"/> Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: MGRM NAME: KENNEDY, CHRIS STREET ADDRESS: 3215 SW 35TH BLVD CITY-ST-ZIP: GAINESVILLE, FL 32608 <input type="checkbox"/> Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  DATE: 4/19/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			

x



#205000007933

Abstract

Date of this notice: 02-02-2005

Employer Identification Number:
86-1127916

Form: SS-4

Number of this notice: CP 575 B

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.



MR TEEZ LLC
MCCLAIN JULIAN MBR
1614 SW 16TH ST
GAINESVILLE FL 32608

001055

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 86-1127916. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

Based on the information from you or your representative, you must file the following form(s) by the date shown next to it.

Form 1065

04/15/2006

If you have questions about the form(s) or the due date(s) shown, you can call us at 1-800-829-4933 or write to us at the address at the top of the first page of this letter. If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office or from our web site at www.irs.gov.

We assigned you a tax classification (S-Corporation, Partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a determination of your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Revenue Procedure 98-01, 1998-1 I.R.B.7 (or superceding revenue procedure for the year at issue.)