

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008638

FILED  
Jan 09, 2006  
Secretary of State

Entity Name: PROPERTY OPTIONS, LLC

## Current Principal Place of Business:

316 TIPPERARY WAY  
NICEVILLE, FL 32578

## New Principal Place of Business:

## Current Mailing Address:

316 TIPPERARY WAY  
NICEVILLE, FL 32578

## New Mailing Address:

FEI Number: 20-3369254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

RANDALL, WILLIAM V  
320 OAKLAKE LANE  
NICEVILLE, FL 32578 US

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: WILLIAM V. RANDALL

01/09/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SCHLADENHAUFFEN, BENJAMIN G  
Address: 316 TIPPERARY WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: S ( ) Delete  
Name: SCHLADENHAUFFEN, ELIZABETH S  
Address: 316 TIPPERARY WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: T ( ) Delete  
Name: SCHLADENHAUFFEN, BENJAMIN C  
Address: 316 TIPPERARY WAY  
City-St-Zip: NICEVILLE, FL 32578

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: MGR ( ) Change (X) Addition  
Name: RANDALL, ROBBYE  
Address: 320 OAKLAKE LANE  
City-St-Zip: NICEVILLE, FL 32578

Title: OP ( ) Change (X) Addition  
Name: FINN, PATRICK  
Address: 283 GROVE LANE  
City-St-Zip: FREEPORT, FL 32578

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: BEN SCHLADENHAUFFEN

MGR

01/09/2006

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