

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021004

Entity Name: TOLL-RATTLESNAKE, LLC

FILED
Jan 13, 2006
Secretary of State

Current Principal Place of Business:

28341 TAMIAMI TRAIL, SUITE 4
BONITA SPRINGS, FL 34134

New Principal Place of Business:

28341 TAMIAMI TRAIL, SUITE 4
BONITA SPRINGS, FL 34134 US

Current Mailing Address:

28341 TAMIAMI TRAIL, SUITE 4
BONITA SPRINGS, FL 34134

New Mailing Address:

28341 TAMIAMI TRAIL, SUITE 4
BONITA SPRINGS, FL 34134 US

FEI Number: 20-4037661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REINERT, RALPH
28341 TAMIAMI TRAIL, SUITE 4
BONITA SPRINGS, FL 34134 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: TAYLOR, MICHAEL A
Address: 7955 AIRPORT PULLING ROAD, SUITE 103
City-St-Zip: NAPLES, FL 34109

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SEMBLER FAMILY PARTN, ERSHIP #42, LT D .
Address: 5858 CENTRAL AVENUE
City-St-Zip: ST. PETERSBURG, FL 33707 US

Title: MGR () Change (X) Addition
Name: TOLL FL VII LIMITED, PARTNERSHIP
Address: 250 GILBRALTER ROAD
City-St-Zip: HORSHAM, PA 19044 US

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: RALPH E. REINERT

V

01/13/2006

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