

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022877

FILED
Apr 11, 2006
Secretary of State

Entity Name: COUNTRYTYME FLORIDA, LLC

Current Principal Place of Business:

920 CHURCHHILL LANE
ST. AUGUSTINE, FL 32092 US

New Principal Place of Business:

2765 PONTE VEDRA BEACH BLVD
PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address:

920 CHURCHHILL LANE
ST. AUGUSTINE, FL 32092 US

New Mailing Address:

2765 PONTE VEDRA BEACH BLVD
PONTE VEDRA BEACH, FL 32082 US

FEI Number: 20-2460194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, MARK MR.
920 CHURCHHILL LANE
ST. AUGUSTINE, FL 32092 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: WILCOX, JAMES L
Address: 920 CHURCHHILL LANE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: MGR () Delete
Name: GRAHAM, MARK
Address: 920 CHURCHHILL LANE
City-St-Zip: ST. AUGUSTINE, FL 32092 US

Title: MGRM () Delete
Name: COUNTRYTYME DEVELOPM, ENT, LTD.
Address: 1660 GATE CIRCLE
City-St-Zip: GROVE CITY, OH 43123

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WILCOX, JAMES L
Address: 2765 PONTE VEDRA BEACH BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

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

Title: MGRM (X) Change () Addition
Name: COUNTRYTYME DEVELOPM, ENT, LTD.
Address: 1660 GATEWAY CIRCLE
City-St-Zip: GROVE CITY, OH 43123 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: JAMES L. WILCOX

MGR

04/11/2006

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