2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Mar 23, 2006 8:00 am Secretary of State DOCUMENT # L05000027627 03-08-2006 90044 029 \*\*\*\*50.00 1. Entity Name YELLOWTAIL TRADING COMPANY, LLC Principal Place of Business Mailing Address 4434 OCEAN VIEW DRIVE DESTIN FL 32541 30003119 Пиниминициници 4434 OCEAN VIEW DRIVE DESTIN FL 32541 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (10/05) 1st MOORE City & State City & State 4. FEI Number Applied For 202679703 Not Applicable Zio Country Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COLOWICH, JOHN F ESO. LAW OFFICES OF JOHN F. COLOWICH Street Address (P.O. Box Number is Not Acceptable) 4300 LEGENDARY DRIVE, SUITE 202 DESTIN FL 32541 👼 City Zip Code 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 Systems, Pytholic or product lugates or reproduced upont credible Completed by (NOTE: Registried Argent separature incurand when remalitary) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10 TILE марм TIT1 F Delete ☐ Change ☐ Addition NAME ARCHER, JEFFREY W NAME STREET ADDRESS STREET ADDRESS 4434 OCEAN VIEW DRIVE CITY-S1-ZP CITY-SI-ZIP DESTIN FL 32541 Defete HIEF TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP TOTALE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME MALAS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP nne Delete TITLE ☐ Change Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE [ ] Change ☐ Addition NAME SCREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. Fhereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 fimited liability company or the receiver or manager of the timited liability company or the receiver or manager of the secure this report as required by Chapter 608, Florida Statutes. SIGNATURE: TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



Division of Corporations

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March 9, 2006

YELLOWTAIL TRADING COMPANY, LLC 4434 OCEAN VIEW DRIVE DESTIN, FL 32541

Subject: YELLOWTAIL TRADING COMPANY, LLC

Reference Number:

L05000027627

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/cj ANNUAL REPORTS SECTION