2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 01, 2006
Secretary of State

DOCUMENT# L05000030802

Entity Name: NEW BEGINNINGS OF FORT MEADE, LLC

Current Principal Place of Business:

P.O. BOX 41683
PLYMOUTH, MN 55441 US

New Principal Place of Business:

6682 ORCHID LANE NORTH
MAPLE GROVE, MN 55311 US

Current Mailing Address:

P.O. BOX 41683
PLYMOUTH, MN 55441 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LANCASTER, JOHN J
500 SOUTH FLORIDA AVENUE
SUITE 800
LAKELAND, FL 33801 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: MGRM ( ) Delete
Name: DAVIS, TARREL D
Address: P.O. BOX 41683
City-St-Zip: PLYMOUTH, MN 55441 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DAVIS, TARREL D
Address: 6682 ORCHID LANE NORTH
City-St-Zip: MAPLE GROVE, MN 55311 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: TARREL D DAVIS MGRM 09/01/2006

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