

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)**

**FILED**  
**Feb 27, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90176 035 \*\*\*\*50.00

DOCUMENT # L05000033289					
1. Entity Name PEACOCK FARMS, LLC					
Principal Place of Business 26044 FAWNWOOD CRT BONITA SPRINGS FL 34134			Mailing Address 26044 FAWNWOOD CRT BONITA SPRINGS FL 34134		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SCHUMANN, RAYMOND L 27200 RIVERVIEW CENTER BLVD. 103 BONITA SPRINGS FL 34134				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL
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 _____ (NOTE: Registered Agent signature required when renewing) _____ DATE _____					
<b>FILE NOW!!! FEE IS \$50.00</b> <b>Make Check Payable to Florida Department of State</b> <b>Due By May 1, 2006</b>					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	N B M MANAGEMENT, LLC		NAME		
STREET ADDRESS	5172 SEAHORSE AVE.		STREET ADDRESS		
CITY - ST - ZIP	NAPLES FL 34103		CITY - ST - ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SOUTHWEST FLORIDA CAPITAL INVESTORS, LLC		NAME		
STREET ADDRESS	4801 ISLAND POND COURT, #804		STREET ADDRESS		
CITY - ST - ZIP	BONITA SPRINGS FL 34134		CITY - ST - ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KOZLOWSKI DEVELOPMENT CO, INC.		NAME		
STREET ADDRESS	26044 FAWNWOOD CRT		STREET ADDRESS		
CITY - ST - ZIP	BONITA SPRINGS FL 34134		CITY - ST - ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GILLETTE, ROBERT		NAME		
STREET ADDRESS	26201 MIRA WAY		STREET ADDRESS		
CITY - ST - ZIP	BONITA SPRINGS FL 34134		CITY - ST - ZIP		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LYNETTE J. MEHLE TRUST		NAME		
STREET ADDRESS	26190 MIRA WAY		STREET ADDRESS		
CITY - ST - ZIP	BONITA SPRINGS FL 34134		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Frank H. [Signature]</u>			Date: <u>1/28/06</u> 239-992-5285		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 9, 2006

PEACOCK FARMS, LLC  
26044 FAWNWOOD CRT  
BONITA SPRINGS, FL 34134

Subject: PEACOCK FARMS, LLC

Reference Number: L05000033289

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** 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

Completed  
AS REQUESTED  
F. Kozlowski  
2-22-06