


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-06-2006 90205 025 ****50.00

DOCUMENT # L0500040835
 1. Entity Name
CONECUH PLANTATION, LLC



Principal Place of Business Mailing Address
840 WATERWAY PLACE **840 WATERWAY PLACE**
LONGWOOD FL 32750 **LONGWOOD FL 32750**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

30005130



1st MOORE CR2E083 (10/05)

4. FEI Number Applied For
20-2745879 Not Applicable
 5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
BEGGS & LANE, A REGISTERED LLP
501 COMMENDENCIA ST
PENSACOLA FL 32502

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

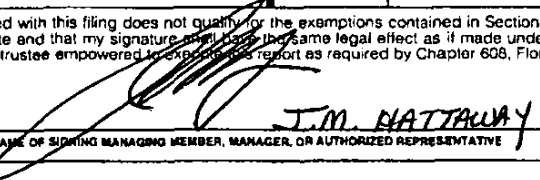
9. ~~MG. MEMBER~~ **MANAGING MEMBERS/MANAGERS**

TITLE	J. MICHAEL HATTAWAY	<input type="checkbox"/> Delete
NAME	840 WATERWAY PLACE	
STREET ADDRESS	LONGWOOD, FL 32750	
CITY-ST-ZIP		
TITLE	MG. MEMBER	<input type="checkbox"/> Delete
NAME	ROBERT HATTAWAY	
STREET ADDRESS	601 HILLVIEW DR	
CITY-ST-ZIP	ALTAIR MONTICELLO SPGS FL 32714	
TITLE	MG. MEMBER	<input type="checkbox"/> Delete
NAME	MAX F. RIDDICK	
STREET ADDRESS	1553 WINTER SPGS BLVD	
CITY-ST-ZIP	WINTER SPGS FL 32708	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. **ADDITIONS/CHANGES**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 file this report as required by Chapter 608, Florida Statutes.

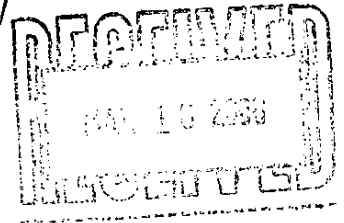
SIGNATURE:  **J.M. HATTAWAY** 2/24/06 407-831-7500
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #



ATTACHMENT

30003149

FLORIDA DEPARTMENT OF STATE
Division of Corporations



March 8, 2006

CONECUH PLANTATION, LLC
840 WATERWAY PLACE
LONGWOOD, FL 32750

Subject: CONECUH PLANTATION, LLC

Reference Number: L05000040835

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.

List the complete title, name, street address, city, state and zip code of each manager, managing member or principal of the limited liability company.

✓ 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.

ANNUAL REPORTS SECTION