

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045199

FILED
Jan 13, 2006
Secretary of State

Entity Name: ROBINSON FAMILY PROPERTIES LLC

Current Principal Place of Business:

3852 L.B. MCLEOD RD
ORLANDO, FL 32936 US

New Principal Place of Business:

401 N STONE ST
DELAND, FL 32720 US

Current Mailing Address:

3852 L.B. MCLEOD RD
ORLANDO, FL 32936 US

New Mailing Address:

401 N STONE ST
DELAND, FL 32720 US

FEI Number: 20-2832568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, TERRY W
3852 L.B. MCLEOD RD
ORLANDO, FL 32936 US

Name and Address of New Registered Agent:

ROBINSON, TERRY W
1875 N LEAVITT
ORANGE CITY, FL 32763 US

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:

01/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROBINSON, TERRY W
Address: 3852 L.B. MCLEOD RD
City-St-Zip: ORLANDO, FL 32936 US

Title: MGRM () Delete
Name: ROBINSON, STEPHEN L
Address: 3852 L.B. MCLEOD RD
City-St-Zip: ORLANDO, FL 32936 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROBINSON, TERRY W
Address: 1875 N LEAVITT
City-St-Zip: ORANGE CITY, FL 32763 US

Title: MGRM (X) Change () Addition
Name: ROBINSON, STEPHEN L
Address: 595 MCCARTY WAY
City-St-Zip: ORANGE CITY, FL 32763 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: STEPHEN L ROBINSON

MGRM

01/13/2006

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