## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Jul 03, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # L0500005 Cland, LLC	5772			04-28-2006 90	0023 021 ****5	0.00
Principal Place of Business Mailing Address				<del></del>			
		2623 HORSESHOE COU COCOA, FL 32926	23 HORSESHOE COURT Coa. Fl. 32926				
				 	2010) (FILL COM 2010 (COM		mm e ce
2. Principal P	lace of Business	3. Mailing Address	<del>_</del> _				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04032006	Chg-LLC	CR2E083 (11/05	5)
City & State		City & State		4. FEI Numb	509 481	?	Applied Fo
Zip	Country	Zip	Country		of Status Desired	55.00 A	dditional
	6. Name and Address of Curre	at Registered Agent		7. Name and	Address of New Re		
MIRANDA, HERBERT		Name					
2623 HORSESHOE COURT COCOA, FL 32926			Street Addres	reet Address (P.O. Box Number is Not Acceptable)			
	#:						
			City			FL Zip Co	ode
	named entity submits this statement ions of registered agen.	for the purpose of changing its	registered office or regis	stered agent, or bo	th, in the State of Flor	rida. I am familiar wit	th, and acc
SIGNATURE	Signature, hyped or printed name of registered age	MATERIAL STATES	E: Registered Agent Signature red	Manufacture assessment	<del></del>	LATE	
Filing Fee is \$50.00 Due by May 1, 2006							
D	iling Fee is \$50.00 ue by May 1, 2006					check payable to Department of St	
D	ue by May 1, 2006	BERS/MANAGERS	10.			check payable to Department of St	
9.	MANAGING MEM		10.		Florida	check payable to Department of St	nte
9.	we by May 1, 2006  MANAGING MEM	BERS/MANAGERS	10.		Florida	o check payable to Department of St CHANGES	ete
9. ITLE NAME	MANAGING MEM MGR MIRANDA, HERBERT	BERS/MANAGERS	10. TILE NAME		Florida	o check payable to Department of St CHANGES	nte
9. ITILE MAME STREET ADDRESS CITY-SI-ZP TITLE	MANAGING MEM  MGR  MIRANDA, HERBERT  2623 HORSESHOE COURT	BERS/MANAGERS	10.  TITLE  MANE  STREET ADDRESS  CITY-ST-ZP  TITLE		Florida	o check payable to Department of St CHANGES	: []Ad
9. ITTLE NAME STREET ADDRESS CITY-SI-ZP	MANAGING MEM  MGR  MIRANDA, HERBERT  2623 HORSESHOE COURT	BERS/MANAGERS	10.  TITLE MANE STREET ADDRESS CITY-ST-ZP	-	Florida	e check payable to Department of Sta CHANGES	nte
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K. C. mil

4-27-06

<sup>11.</sup> I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.