2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2007
Secretary of State

DOCUMENT# L05000059480

Entity Name: SIX PACK DEVELOPMENT, LLC

Current Principal Place of Business:

126 SW SUMATRA AVENUE
SUITE D
MADISON, FL 32340 US

New Principal Place of Business:

Current Mailing Address:

126 SW SUMATRA AVENUE
SUITE D
MADISON, FL 32340

New Mailing Address:

FEI Number: 04-3819054 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLEBURN, JAMES H
126 SW SUMATRA AVENUE
SUITE D
MADISON, FL 32340 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:	RUTHERFORD, WILLIAM	
Address:	3774 SW SUNDOWN CREEK RD	
City-St-Zip:	GREENVILLE, FL 32331 US	
Title:	MGRM	( ) Delete
Name:	HARTMAN, MICHAEL	
Address:	3916 WOODGREEN WAY	
City-St-Zip:	TALLAHASSEE, FL 32309 US	
Title:	MGRM	( ) Delete
Name:	WEEKS, SUE	
Address:	3280 RUE DELAFITTE	
City-St-Zip:	TALLAHASSEE, FL 32312 US	
Title:	MGRM	( ) Delete
Name:	ROBINSON, LOWELL D	
Address:	POST OFFICE BOX 298	
City-St-Zip:	MADISON, FL 32341 US	
Title:	MGRM	( ) Delete
Name:	BROWN, WILLIAM F JR	
Address:	208 NE ROCKY FORD ROAD	
City-St-Zip:	MADISON, FL 32340 US	
Title:	MGRM	( ) Delete
Name:	COLEBURN, JAMES H	
Address:	126 SW SUMATRA AVENUE SUITE D	
City-St-Zip:	MADISON, FL 32340 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: JAMES H. COLEBURN MGRM 02/06/2007

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