

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060427

FILED
Jul 05, 2006
Secretary of State

Entity Name: SCHREIBER RANCH, LLC

Current Principal Place of Business:

543 S.W. BROOKWOOD DRIVE
LAKE CITY, FL 32024

New Principal Place of Business:

335 SW ZEBRA TERRACE
LAKE CITY, FL 32024

Current Mailing Address:

543 S.W. BROOKWOOD DRIVE
LAKE CITY, FL 32024

New Mailing Address:

335 SW ZEBRA TERRACE
LAKE CITY, FL 32024

FEI Number: 20-4622495 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

METCALF, DAVID J
1677 MANHAN CENTER BOULEVARD
TALLAHASSEE, FL 32308 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: SCHREIBER, BRIAN P
Address: 335 SW ZEBRA TERRACE
City-St-Zip: LAKE CITY, FL 32024 US

Title: SEC () Change (X) Addition
Name: SCHREIBER, KATHERINE L
Address: 335 SW ZEBRA TERRACE
City-St-Zip: LAKE CITY, FL 32024 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: BRIAN P SCHREIBER

PRES

07/05/2006

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