

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062024

FILED
Jul 31, 2006
Secretary of State

Entity Name: YOUNG'S SCALE HOUSE I, LLC

Current Principal Place of Business:

1515 HIGHWAY 17 NORTH
EAGLE LAKE, FL 33893

New Principal Place of Business:

1515 HIGHWAY 17 NORTH
EAGLE LAKE, FL 33839

Current Mailing Address:

1515 HIGHWAY 17 NORTH
EAGLE LAKE, FL 33893

New Mailing Address:

1515 HIGHWAY 17 NORTH
EAGLE LAKE, FL 33839

FEI Number: 20-3272091 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:

Name and Address of New Registered Agent:

LASMAN, JEFFREY M ESQ.
C/O LASMAN LAW FIRM, P.A.
6152 DELANCEY STATION STREET, SUITE 205
RIVERVIEW, FL 33569 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: YOUNG, CHARLES J III
Address: 1515 HIGHWAY 17 NORTH
City-St-Zip: EAGLE LAKE, FL 33893

Title: MGRM () Delete
Name: YOUNG, NANCY L
Address: 1515 HIGHWAY 17 NORTH
City-St-Zip: EAGLE LAKE, FL 33893

ADDITIONS/CHANGES:

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: NANCY L. YOUNG

MGRM

07/31/2006

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