

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 21, 2006 8:00 am
Secretary of State

01-26-2006 90068 040 ****50.00

DOCUMENT # L05000102967 1. Entity Name BALSK, LLC					
Principal Place of Business TETON MOUNTAIN LODGE 3385 W. VILLAGE DRIVE, UNIT 112 TETON VILLAGE WY 83025 US			Mailing Address 808 EAST LAKE DRIVE SHALIMAR FL 32579		
2. Principal Place of Business NA		3. Mailing Address NA			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 203-65000-5	
Zip		Zip		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ROYSTER, BRENDA J 808 EAST LAKE DRIVE SHALIMAR FL 32579			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Brenda J Royster</i></u> DATE <u>1/19/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reconstituting)					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State. Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PRESIDENT BRENDA ROYSTER 808 E. LAKE DR. SHALIMAR, FL 32579 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VICE PRESIDENT KERH GROSNIK 6920 ECHO CANYON DRIVE MCKINNEY, TX 75070 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TREASURER LEE ANN GROSNIK 6920 ECHO CANYON DR MCKINNEY, TX 75070 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SECRETARY CLAUDE C. ROYSTER 808 EAST LAKE DR. SHALIMAR, FL 32579 ☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u><i>Brenda J Royster</i></u>				Date <u>1/19/06</u> Daytime Phone <u>850-651-8181</u>	