


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 24, 2006 8:00 am**  
**Secretary of State**

01-24-2006 90043 004 \*\*\*\*50.00

<b>DOCUMENT # L05000107675</b> 1. Entity Name <b>ARCTIC SPRING, LLC</b>					
Principal Place of Business <b>6225 ELM SQ. E. LAKELAND, FL 33813 US</b>			Mailing Address <b>6225 ELM SQ. E. LAKELAND, FL 33813 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>33-1125709</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>CHACHULA, KATHERINE W 6225 ELM SQ. E. LAKELAND, FL 33813</b>				Name Street Address (P.O. Box Number is Not Acceptable) City	
				<b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>				<b>Make check payable to Florida Department of State</b>	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
			<b>MANAGING MEMBER COVEY, MATTHEW 6225 ELM SQUARE E LAKELAND FL 33813</b>		
			<b>MANAGING MEMBER CHACHULA, KATHERINE 6225 ELM SQUARE E LAKELAND FL 33813</b>		
11. I hereby certify that the information supplied with this filing 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
<b>SIGNATURE:</b> <i>Katherine Chachula</i> KATHERINE CHACHULA			Ms. Member 1/20/06 863-644-7244 Date Daytime Phone #		

20002554



01202006 Chg-LLC CR2E083 (11/05)

Applied For  
Not Applicable

FL Zip Code