2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000107991



FILED Mar 27, 2006 8:00 am Secretary of State 03-27-2006 90048 016 ****50.00

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Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Country Zip Country Zip Country Zip Country S. Certificate of Status Desired \$5.00 Addition Fee Required 6. Name and Address of Current Registered Agent Name HOLCOMB, JOHN W JR. 30395 NW 72ND AVENUE OKEECHOBEE, FL 34972 Signature, typed or protect name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstating) Make check payable to Florida Department of State Make Chock Dayable to Florida Department of State Make Chock Dayable to Florida Department of State Make Chock Dayable to Florida Department of State Sirect Address (P.O. Box Number is Not Acceptable) Date Make check payable to Florida Department of State Make Chock Dayable to Florida Department of State Signature, typed or protect name of registered agent and title it applicable. Make Chock Dayable to Florida Department of State P. MANAGING MEMBERS/MANAGERS ITILE MGRM HOLCOMB, JOHN W JR. SIRECT ADDRESS CITY-ST-ZIP OKEECHOBEE, FL 34972 OKEECHOBEE, FL 34972 OKEECHOBEE, FL 34972 OXIDERATIONS	d For plicable
City & State Country Country Country Country Country Country Country Country 5. Certificate of Status Desired	plicable
Zip Country Zip Country S. Certificate of Status Desired S. S. 00 Addition Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOLCOMB, JOHN W JR. 30395 NW 7ZND AVENUE OKEECHOBEE, FL 34972 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 the obligations of registered agent. SIGNATURE Filling Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGRM HOLCOMB, JOHN W JR. STREET ADDRESS CITY - ST-ZIP OKEECHOBEE, FL 34972 CITY - ST-ZIP OKEECHOBEE, FL 34972 Not Agent and Address of New Registered Agent Status Desired	plicable
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SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

863-467-6565