

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123627

FILED  
Jul 06, 2006  
Secretary of State

Entity Name: CARROLLWOOD HOLDINGS, LLC

**Current Principal Place of Business:**

1327 LAKE MIRROR TERRACE NW  
WINTER HAVEN, FL 33881

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 811  
WINTER HAVEN, FL 338820811

**New Mailing Address:**

FEI Number: 54-2192232      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:**

SMITH, CHARLES C III  
1327 LAKE MIRROR TERRACE NW  
WINTER HAVEN, FL 33881      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: MGR      ( ) Delete  
Name: SMITH, CHARLES C III  
Address: P.O. BOX 811  
City-St-Zip: WINTER HAVEN, FL 338820811

Title: MGR      ( ) Delete  
Name: SIMONDS, JOSEPH L  
Address: 306 LAKEBRIDGE CROSSING  
City-St-Zip: CANTON, GA 30114

**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: CHARLES C. SMITH III

MGR

07/06/2006

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