

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000720

FILED
May 23, 2006
Secretary of State

Entity Name: OSBORNE-FRAZIER FAMILY PARTNERSHIP, L.C.

Current Principal Place of Business:

1793 F.I.M. BLVD
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

1793 F.I.M. BLVD
FORT WALTON BEACH, FL 32547

New Mailing Address:

151 ELDREDGE RPAD
FORT WALTON BEACH, FL 32547

FEI Number: 59-3389782 **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:

OSBORNE, ROBERT P
151 ELDRERGE RD.
FT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

OSBORNE, ROBERT P PROF
151 ELDRERGE RD.
FT WALTON BEACH, FL 32547 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: PROF. ROBERT PAUL OSBORNE

05/23/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OSBORNE, ROBERT P
Address: 151 ELDREDGE RD
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OSBORNE, ROBERT P PROF
Address: 151 ELDREDGE RD
City-St-Zip: FORT WALTON BEACH, FL 32547

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: PROF. ROBERT PAUL OSBORNE

MGR

05/23/2006

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