


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L99000000578</b> 1. Entity Name MT. DORA PARTNERS, L.L.C.	
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Principal Place of Business 5600 U.S. HIGHWAY 98 NORTH, SUITE 7 LAKE LAND, FL 33809	Mailing Address 5600 U.S. HIGHWAY 98 NORTH, SUITE 7 LAKE LAND, FL 33809
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04102006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3558910	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  YOUNG, ROBERT B 5600 U.S. HIGHWAY 98 NORTH, SUITE 7 LAKE LAND, FL 33809
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and (title if applicable). (NOTE, Registered Agent signature required when reinstating)


**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR YOUNG, ROBERT B 5600 U.S. HIGHWAY 98 NORTH, SUITE 7 LAKE LAND, FL 33809
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEM YOUNG, ROBERT B 5600 U.S. HIGHWAY 98 NORTH, SUITE 7 LAKE LAND, FL 33809
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEM FIELD, KEITH D 428 N. DONNELLY ST., SUITE 3 MT. DORA, FL 32757
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000520586  
05/02/06-80098-016 50.00

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**  **Robert B. Young** 04/18/06 863-859-5464  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #