2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000003653

1. Entity Name
ARM'S REACH WHITE SAILS, LLC

Principal Place of Business	Mailing Address
SUITE 600, THE KRYSTAL BUILDING ONE UNION SQUARE CHATTANOOGA, TN 37402	SUITE 600, THE KRYSTAL BUILDING ONE UNION SQUARE CHATTANOOGA, TN 37402

DO NOT WRITE IN THIS SPACE

01092006No Chg-LLC CR2E083 (11/05)

4. FEI Number
62-1792533
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

STRIBLING, G. BOONE
15883 MEADOWWOOD DR
WELLINGTON, FL 33414

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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) DATE

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CUZZORT, PAMELA K
STREET ADDRESS	SUITE 600, THE KRYSTAL BLDG., ONE UNION SQ
CITY-ST-ZIP	CHATTANOOGA, TN 37402
TITLE	
NAME	
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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: Pamela K. Cuzzort January 9, 2006 423-756-1202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #