


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90153 038 ****50.00

DOCUMENT # M01000001938				
1. Entity Name SNS ORANGE PARK, LLC				
Principal Place of Business 317 BLANDING BLVD. ORANGE PARK, FL 32073		Mailing Address 2120 16TH AVENUE SOUTH BIRMINGHAM, AL 35205		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
		01132006 Chg-LLC CR2E083 (11/05)		
4. FEI Number 63-1281167		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		7. Name and Address of New Registered Agent		
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331		Name SAMUEL W. KELLEY		
		Street Address (P.O. Box Number is Not Acceptable) 4302 GANDY BLVD.		
		City TAMPA		
		FL Zip Code 33611		
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 <i>Sam W. Kelley</i>		SAMUEL W. KELLEY, MGR 1/16/06		
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		Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KELLEY, SAMUEL W 105 CHURCH STREET, SUITE C RAINBOW CITY, AL 35906 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KELLEY, SAMUEL W. 4302 GANDY BLVD. TAMPA, FL 33611 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COLEGROVE, DON 105 CHURCH STREET, SUITE C RAINBOW CITY, AL 35906 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COLEGROVE, DON 217 HUGHES AVENUE ATTALLA, AL 35954 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SNS HOLDINGS, INC. 105 CHURCH STREET RAINBOW CITY, AL 35906 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SNS HOLDINGS, INC. 217 HUGHES AVENUE ATTALLA, AL 35954 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>Sam W. Kelley</i>		SAMUEL W. KELLEY 1/16/06 (205) 939-0227		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #		