


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Aug 14, 2006 08:00 AM**  
**Secretary of State**

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| <b>DOCUMENT # M03000003976</b><br>1. Entity Name<br>TEYNOR'S FLORIDA, LTD. CO. |  |
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| Principal Place of Business<br>101 11TH ST.<br>MARATHON, FL 33050 | Mailing Address<br>308 CYPRESS STREET<br>DUCK KEY, FL 33050 |
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08072006 No Chg-LLC

CR2E083 (11/05)

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| 4. FEI Number<br>34-1939040                               | Applied For<br>Not Applicable            |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional<br>Fee Required |

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| 6. Name and Address of Current Registered Agent<br><br>TEYNOR, ALENE<br>308 CYPRESS STREET<br>DUCK KEY, FL 33050 |
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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 September 6, 2006**

| 9. MANAGING MEMBERS/MANAGERS                   |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>TEYNOR, ALENE<br>308 CYPRESS STREET<br>DUCK KEY, FL 33050 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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| <p>U000000574268<br/>08/14/06-80007-010 50.00</p> <p><b>DO NOT WRITE<br/>IN THIS SPACE</b></p> |
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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:** Alene E. Teynor Alene E. Teynor 8-8-06 419-734-4086  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #