

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004017

Entity Name: JUNE BUG TWO, LLC

FILED
Jun 02, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 70176
ALBANY, GA 317080176

New Principal Place of Business:

P.O. BOX 70246
ALBANY, GA 317080246

Current Mailing Address:

P.O. BOX 70176
ALBANY, GA 317080176

New Mailing Address:

P.O. BOX 70246
ALBANY, GA 317080246

FEI Number: 20-0396466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

GUNTER, CHAD E
331 BRUCE STREET
ST. GEORGE, FL 32328 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GUNTER, CHAD E
Address: 208 N. MAGNOLIA STREET
City-St-Zip: ALBANY, GA 31707

Title: MGR (X) Delete
Name: ELLION, DAVID M
Address: 208 N. MAGNOLIA STREET
City-St-Zip: ALBANY, GA 31707

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHAD E. GUNTER

MGR

06/02/2006

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