

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90135 033 ****50.00

DOCUMENT # M04000001454

1. Entity Name
LATERRA, LLC



Principal Place of Business
**824 MARKET STREET, SUITE 900
WILMINGTON, DE 19081**

Mailing Address
**824 MARKET STREET, SUITE 900
WILMINGTON, DE 19081**

20001705



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032006 Chg-LLC CR2E083 (11/05)

City & State

City & State

4. FEI Number
20-0982917

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME RAHUBA, BARTLEY J
STREET ADDRESS 1800 GRANT BUILDING
CITY-ST-ZIP PITTSBURGH, PA 15219

TITLE President ☒ Change ☐ Addition
NAME
STREET ADDRESS 330 Grant St. Suite 1900
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME HEAD, DAVID E JR.
STREET ADDRESS 18300 SCENIC HIGHWAY 98, SUITE B
CITY-ST-ZIP FAIR HOPE, AL 36564

TITLE Executive Vice President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME LEFFARD, DAVID
STREET ADDRESS P.O. BOX 230
CITY-ST-ZIP POINT CLEAR, AL 36564

TITLE Vice President and CFO ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME SLOAN, WAYNE
STREET ADDRESS 200-1 REGISTRY BOULEVARD
CITY-ST-ZIP ST. AUGUSTINE, FL 32092

TITLE Vice President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME PETAK, JOSEPH G
STREET ADDRESS 1800 GRANT BUILDING
CITY-ST-ZIP PITTSBURGH, PA 15219

TITLE Vice President ☒ Change ☐ Addition
NAME
STREET ADDRESS 330 Grant St. Suite 1900
CITY-ST-ZIP

TITLE MGR ☒ Delete
NAME SVORCEK, JOHN A
STREET ADDRESS 1800 GRANT BUILDING
CITY-ST-ZIP PITTSBURGH, PA 15219

TITLE Secretary ☐ Change ☒ Addition
NAME Carol J. Cusick-Riley
STREET ADDRESS 330 Grant St., Suite 1900
CITY-ST-ZIP Pittsburgh, PA 15219

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #