

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 21, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000003242

1. Entity Name
WANNAGAT PROPERTIES, LLC



Principal Place of Business
29614 JASON MALBIS BLVD.
DAPHNE, AL 36526

Mailing Address
29614 JASON MALBIS BLVD.
DAPHNE, AL 36526

DO NOT WRITE IN THIS SPACE



01102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-2742568

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FREAN, ANTONIO
885 MANN ROAD
BARTON, FL 33830

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IN THIS SPACE**

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 re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
FISHER, MITCHELL
29614 JASON MALBIS BLVD.
DAPHNE, AL 36526

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
FREAN FISHER, MARIA
29614 JASON MALBIS BLVD.
DAPHNE, AL 36526

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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03/04/06 80029-005 50.00

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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: *Maria Frean Fisher*

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

2-16-06 (251)625-4318

ORIS

Daytime Phone #