


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 03, 2006 8:00 am**  
**Secretary of State**

03-03-2006 90003 009 \*\*\*\*50.00

**DOCUMENT # L00000013207**

1. Entity Name  
 17TH STREET ASSOCIATES, LLC



Principal Place of Business 1345 MAIN STREET STE C2 SARASOTA, FL 34236	Mailing Address 1345 MAIN STREET STE C2 SARASOTA, FL 34236
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**DO NOT WRITE IN THIS SPACE**



02092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-1060483	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

MORAN, JOHN A ESQUIRE  
 1990 MAIN STREET  
 SARASOTA, FL 34236

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DORE, STEPHEN W 2558 WATERVIEW CT SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SULLIVAN, J M 1742 PEREGRINE POINT DRIVE SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KALIN, EDWARD L 5252 S. TAMiami TRAIL SARASOTA, FL 34239
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MALKIN, ROBERT 1620 BLUE HERON DRIVE SARASOTA, FL 34239
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DUNNING, JERRY 5009 COCO PLUM WAY SARASOTA, FL 34241
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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, OR AUTHORIZED REPRESENTATIVE

Date: 2/14/06

Daytime Phone # \_\_\_\_\_

Attachment  
20012494  
~~#L00000013207~~  
LAW OFFICES OF

**DUNLAP & MORAN, P.A.**

SUITE 700  
1990 MAIN STREET  
SARASOTA, FLORIDA 34236  
POST OFFICE BOX 3948  
SARASOTA, FLORIDA 34230-3948  
TELEPHONE 941-366-0115  
FACSIMILE 941-365-4660

February 28, 2006

JUDSON H. BAILEY  
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GARY KAUFFMAN<sup>¶¶</sup>  
THOMAS B. LUZIER  
RUTH E. McMAHON<sup>†</sup>  
DAVID M. MITCHELL<sup>§</sup>  
JOHN A. MORAN  
REBECCA J. PROCTOR  
BURTON M. ROMANOFF\*  
JOHNSON S. SAVARY, JR. <sup>¶¶</sup>

\* FLORIDA BAR BOARD CERTIFIED-  
REAL ESTATE  
^ ALSO LICENSED IN KENTUCKY  
\*\* ALSO LICENSED IN TEXAS  
† OF COUNSEL  
‡ ALSO LICENSED IN CONNECTICUT  
¶¶ ALSO LICENSED IN NEW YORK  
§ FLORIDA BAR BOARD CERTIFIED-  
WILLS, TRUSTS & ESTATES  
ALSO LICENSED IN  
COLORADO AND MICHIGAN  
§ OF COUNSEL  
\* ALSO LICENSED IN PENNSYLVANIA  
¶¶ ALSO LICENSED IN MICHIGAN

5358-1

Division of Corporations  
Post Office Box 6478  
Tallahassee, FL 32314

Re: 17<sup>th</sup> STREET ASSOCIATES, LLC

Dear Sir/Madam:

**Enclosed** herewith for filing is the 2006 Limited Liability Annual Report, in connection with the above-referenced limited liability company.

Also, **enclosed** please find a check in the amount of \$50.00, representing payment of your filing fee.

If you have any questions with regard to this letter and/or the enclosure, please do not hesitate to contact me.

Very truly yours,

**DUNLAP & MORAN, P.A.**

  
\_\_\_\_\_  
Ryan A. Featherstone, Esq.

RAF:5358-1/Ltr - Div of Corp - An Rpt filing  
Enclosures