

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
May 17, 2006  
Secretary of State

DOCUMENT# L01000007389

Entity Name: MENNA-PINELLAS, LLC

**Current Principal Place of Business:**

38724 U.S. 19 N.  
STE. 100  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

38724 U.S. 19 N.  
STE. 294  
TARPON SPRINGS, FL 34689 US

**Current Mailing Address:**

P.O. BOX 1297  
TARPON SPRINGS, FL 346881297 US

**New Mailing Address:**

FEI Number: 59-3721260      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

**Name and Address of New Registered Agent:**

PRATESI, EMIL G ESQ.  
1253 PARK STREET  
CLEARWATER, FL 33756 US

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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: MENNA, MARIO  
Address: P.O. BOX 1297  
City-St-Zip: TARPON SPRINGS, FL 346881297

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

Title: MGRM ( ) Delete  
Name: MENNA, JOHN  
Address: P.O. BOX 1297  
City-St-Zip: TARPON SPRINGS, FL 346881297

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

Title: MGRM ( ) Delete  
Name: MENNA, AUGUSTINE  
Address: P.O. BOX 1297  
City-St-Zip: TARPON SPRINGS, FL 346881297

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

Title: MGRM ( ) Delete  
Name: MENNA, MARC  
Address: P.O. BOX 1297  
City-St-Zip: TARPON SPRINGS, FL 346881297

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: MARIO MENNA

MGRM

05/17/2006

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