


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90292 050 ****50.00

DOCUMENT # L01000020336
 1. Entity Name
 1301 LAWNWOOD CIRCLE, L.L.C.



Principal Place of Business 1301 LAWNWOOD CIRCLE FT. PIERCE, FL 34950	Mailing Address 1301 LAWNWOOD CIRCLE FT. PIERCE, FL 34950
---	---

DO NOT WRITE IN THIS SPACE



01162006No Chg-LLC CR2E083 (11/05)

4. FEI Number 04-3689814	Applied For Not Applicable
-----------------------------	-------------------------------

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

6. Name and Address of Current Registered Agent
 GORMAN, ROBERT J
 1209 DELAWARE AVE.
 FT. PIERCE, FL 34950

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 _____
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KANE, ROGER G M.D. 1301 LAWNWOOD CIRCLE FT. PIERCE, FL 34950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MONTEJO, R. EDWARD M.D. 1301 LAWNWOOD CIRCLE FORT PIERCE, FL 34950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GONZALEZ, PATRICK 1301 LAWNWOOD CIRCLE FORT PIERCE, FL 34950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR POZO, JOSE S. 1301 LAWNWOOD CIRCLE FORT PIERCE, FL 34950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: R. EDWARD MONTEJO 3/9/06 772-467-0348
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #