

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029650

**FILED**  
**Apr 28, 2006**  
**Secretary of State**

**Entity Name:** 510 W. STATE ROAD 434, L.L.C.

**Current Principal Place of Business:**

510 W. STATE ROAD 434  
WINTER SPRINGS, FL 32708 US

**New Principal Place of Business:**

**Current Mailing Address:**

1645 POWDER RIDGE DR.  
PALM HARBOR, FL 34683 US

**New Mailing Address:**

FEI Number: 20-0179320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CATHCART, CHRISTOPHER C  
210 N. WYMORE RD.  
WINTER PARK, FL 32789 US

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

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:**

Title: MGRM ( ) Delete  
Name: SAS WASH, L.L.C.,  
Address: 1645 POWDER RIDGE DR.  
City-St-Zip: PALM HARBOR, FL 34683

Title: MGR ( ) Delete  
Name: OSTER, JOHN K  
Address: 1645 POWDER RIDGE DR.  
City-St-Zip: PALM HARBOR, FL 34683

**ADDITIONS/CHANGES:**

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

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: JOHN K. OSTER

MGR

04/28/2006

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