2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000050058

1. Entity Name 1501 SECOND STREET LLC



FILED Jan 10, 2006 08:00 AM Secretary of State

Principal Place of Business 4130 BOCA POINTE DRIVE SARASOTA, FL 34238

Mailing Address

4130 BOCA POINTE DRIVE SARASOTA, FL 34238



01052006No Cha-LLC

CR2E083 (11/05)

4. FEI Number 20-1307069 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

HAUTAMAKI, RAYMOND D 4130 BOCA POINTE DRIVE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE

| SARASOTA, FL 34238 | | IN TH | IIS SPACE | |
|---------------------------------------|--|--|---|--|
| | named entity submits this statement for the purpose of challons of registered agent. | nging its registered office or registered agent, or both, in (NOTE: Registered Agent sonature required when remarking) | the State of Florida. I am familiar with, and accept | |
| | Sgnature, typed or printed name of registered agent and trie if applicable. Illing Fee is \$50.00 to by May 1, 2006 | (notice indiscrete Agent apparate required when the assisting) | UNIE | |
| 9. | MANAGING MEMBERS/MANAGERS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HEUTAMAKI, RAYMOND D 4130 BOCA POINTE DR SARASOTA, FL 34238 | | U00000381288 01/11/06-80047-018 50.00 DO NOT WRITE IN THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HAUTAMAKI, ANN L 4130 BOCA POINTE DR SARASOTA, FL 34238 | Į. | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DO N | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |

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 eath; 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.

ANN L. HAUTAMAKI SIGNATURE: While

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

1-5-06 Date

941-925-4802

Daytime Phone il