


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90018 008 \*\*\*\*50.00

**DOCUMENT # L04000065063**


1. Entity Name  
 200 SOUTH MACDILL, LLC



Principal Place of Business 2506 S. MACDILL AVENUE TAMPA, FL 33629	Mailing Address 2506 S. MACDILL AVENUE TAMPA, FL 33629
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**DO NOT WRITE IN THIS SPACE**

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01112006 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 20-1680815	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

MAYTS, ANDREW J JR  
~~106 S. TAMPA AVENUE STE. 200~~  
 TAMPA, FL 33609      201 N. ARMENIA AVE

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement of information on behalf of the registered office or registered agent or both in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: ANDREW MAYTS      DATE: \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (For U.S. Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGMR LANDERS, JAMES F 2506 S MACDILL AVE TAMPA, FL 33629
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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      Daytime Phone #