2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013096

Entity Name: CPB HOLDINGS, LLC

FILED Jan 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6217 TANAGER PLACE P O BOX 48874 TAMPA, FL 33617 TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

6217 TANAGER PLACE P O BOX 48874 TAMPA, FL 33617 TAMPA, FL 33647

FEI Number: 20-2326847 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHOEPFLIN, CAROL 6217 TANAGER PLACE TAMPA, FL 33617 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:

 Title:
 MGRM () Delete

 Name:
 DAVIS, PAMELA

 Address:
 15922 WYNDOVER RD.

 City-St-Zip:
 TAMPA, FL 33647

Title: MGRM () Delete
Name: SCHOEPFLIN, CAROL
Address: 6217 TANAGER PLACE
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES:

 $\begin{array}{lll} \mbox{Title:} & \mbox{MGRM} & \mbox{(X) Change () Addition} \\ \mbox{Name:} & \mbox{BOND PROPERTIES, INC, .} \end{array}$

Address: P O BOX 48874 City-St-Zip: TAMPA, FL 33647

Title: MGRM (X) Change () Addition Name: CONABLE HULL ASSOCIA, TES, INC.

Address: 6217 TANAGER PLACE City-St-Zip: TAMPA, FL 33617

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: CAROL SCHOEPFLIN MGRM 01/06/2006