

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000027448

FILED
Jan 12, 2006
Secretary of State

Entity Name: GEORGIA STREET PROPERTIES, LLC

Current Principal Place of Business:

305 NORTH FORT HARRISON
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

305 NORTH FORT HARRISON
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 20-2544581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUGLER, BENJAMIN
714 N. FORT HARRISON AVENUE
CLEARWATER, FL 33755 US

Name and Address of New Registered Agent:

KUGLER, BENJAMIN
305 NORTH FORT HARRISON
CLEARWATER, FL 33755 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: BEN KUGLER

01/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POLLACK, RON
Address: 714 N. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM () Delete
Name: KUGLER, BENJAMIN
Address: 714 N. FORT HARRISON AVENUE
City-St-Zip: CLEARWATER, FL 33755

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POLLACK, RON
Address: 305 NORTH FORT HARRISON
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM (X) Change () Addition
Name: KUGLER, BENJAMIN
Address: 305 NORTH FORT HARRISON
City-St-Zip: CLEARWATER, FL 33755

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: BEN KUGLERE

ED

01/12/2006

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