

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Jul 26, 2006
Secretary of State**

DOCUMENT# L05000038377

Entity Name: THE MARTIN LLC

Current Principal Place of Business:

WORLD TRADE CENTER TAMPA
1101 CHANNELSIDE DRIVE, SUITE 240
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

WORLD TRADE CENTER TAMPA
1101 CHANNELSIDE DRIVE, SUITE 240
TAMPA, FL 33602

New Mailing Address:

FEI Number: 36-4574244 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSCA, DANIEL G
PHELPS DUNBAR LLP
100 SOUTH ASHLEY DRIVE SUITE 1900
TAMPA, FL 33602 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: STOLTENBERG, KENNETH K
Address: 1101 CHANNELSIDE DR., #240
City-St-Zip: TAMPA, FL 33602

Title: MGRM () Delete
Name: BOMBEECK, FRANCISCUS H
Address: 1101 CHANNELSIDE DR., #240
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STOLTENBERG, KENNETH K
Address: 1101 CHANNELSIDE DR., #240
City-St-Zip: TAMPA, FL 33602

Title: MGR (X) Change () Addition
Name: BOMBEECK, FRANCISCUS H
Address: 1101 CHANNELSIDE DR., #240
City-St-Zip: TAMPA, FL 33602

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: KENNETH K. STOLTENBERG

MGR

07/26/2006

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