

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058409

Entity Name: TOWER24, LLC

FILED
Apr 07, 2006
Secretary of State

Current Principal Place of Business:

5300 SW 91ST TERRACE
SUITE B
GAINESVILLE, FL 32608

Current Mailing Address:

5300 SW 91ST TERRACE
SUITE B
GAINESVILLE, FL 32608

New Principal Place of Business:

5800 NW 39TH AVE
STE 101
GAINESVILLE, FL 326066972 US

New Mailing Address:

5800 NW 39TH AVE
STE 101
GAINESVILLE, FL 326066972 US

FEI Number: 20-2545344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, ROBERT R
5300 SW 91ST TERRACE
SUITE B
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

BOWERS, PAUL D
5800 NW 39TH AVE
STE 101
GAINESVILLE, FL 326066972 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: PAUL DAVID BOWERS

04/07/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: ROWE, ROBERT R
Address: 5800 NW 39TH AVE STE 101
City-St-Zip: GAINESVILLE, FL 326066972 US

Title: MGRM () Change (X) Addition
Name: ROBINSON, THOMAS A
Address: 5800 NW 39TH AVE STE 101
City-St-Zip: GAINESVILLE, FL 326066972 US

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: THOMAS A ROBINSON

MGRM

04/07/2006

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