## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L05000091361**



FILED
Mar 24, 2006 8:00 am
Secretary of State
03-15-2006 90021 019 \*\*\*\*50.00

1. Entity Nam FLOSSM	NOOR PROPERTIES, LLC					03-13	-2006 90	0021 019	30.00
Principal Place of Business 25941 APPLE BLOSSOM LANE WESLEY CHAPEL, FL 33544		Mailing Address 25941 APPLE BLOSSOM LANE WESLEY CHAPEL, FL 33544			f ITETIVI E	na panda sinna bahna dab	9. <b>88</b> 70 <b>88</b> 88 1971	UUSSS Kannoni min	p D
2. Principal Place of Business		3. Mailing Address		_					
Suite, Apt. #, etc.		Suite, Apt. ∉, etc.		٥	1082006	Chg-LLC	CR2	E083 (11/05)	)
City & State		City & State		4.	FEI Numb	<b>~</b> 20-3.	5317	9 9 1	pplied For lot Applicable
Ζip	Country	Zip	Country	5.	Certificate	e of Status Desire	ed 🖸	\$5.00 Ad Fee Require	
	6. Name and Address of Current I	Registered Agent		7.	Name an	d Address of No	w Registere	d Agent	
FOWLER WHITE BOGGS BANKER C/O THOMAS ELLWANGER			Name Louis B. Mendelsolm  Street Address (P.O. Box Number is Not Acceptable)						
	NNEDY BOULEVARD, SUITE 1	700	<u> </u>	25941 Apple Blossom LANE  City Wesley Chapel FL 2182003444					
			City W	esley	Ch	pel	F	L Zip Cox	344
	named entity submits this statement for tions of registered agent?	the purpose of changing its r	egistered office or n	egistered a	gent, or bo	oth, in the State o			, and eccept
SIGNATURE	Spreture, hood of privated refine of registered agent a	nd into if applicable. (NOTE:	Registered Agent signature	required when	remetating)		DATE	13/06	
	iling Fee is \$50.00 ue by May 1, 2006							payable to tment of Stat	te .
9.	MANAGING MEMBER	RS/MANAGERS	. 10.			ADDITIO	NS/CHANG	ES	
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wrt		☐ Delete	CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition
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NAME STREET ADDRESS CITY-ST-ZIP  11. I hereby (	certify that the information supplied with for this report is true and accurate and tability company or the receiver or trustee	this filling does not qualify for that my signature shall have the empowered to execute this re	NAME STREET ADDRESS CITY-ST-ZIP	as if made Chapter 60	under oath 08, Florida	that I am a ma	naging mem	bity that the info	ormation of the

SIGNATURE: MICHAELE AND TYPED OR PRINTED MAKE OF BIGING MANAGING MEMBER, MANAGER, OR AUTHORIGED REPRESENTATIVE



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2006

FLOSSMOOR PROPERTIES, LLC 25941 APPLE BLOSSOM LANE WESLEY CHAPEL, FL 33544

Subject: FLOSSMOOR PROPERTIES, LLC

Reference Number:

L05000091361

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

List the complete title, name, street address, city, state and zip code of each manager, managing member or principal of the limited liability company.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CJ ANNUAL REPORTS SECTION