


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Aug 07, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M03000000377</b>	
1. Entity Name GOLDENROD ASSOCIATES, LLC	

Principal Place of Business 580 E. MAIN STREET STE. 300 NORFOLK, VA 23510	Mailing Address 580 E. MAIN STREET STE. 300 NORFOLK, VA 23510
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DO NOT WRITE IN THIS SPACE



07052006 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>33-1033659</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525

FAB 2/98  
5472-000

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GOLDENROD MANAGEMENT, LLC 580 E. MAIN STREET STE. 300 NORFOLK, VA 23510
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>ENTERED</b> <b>JUL 12 2006</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000573557  
08/07/06-80002-010 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate, and that my 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:       8/4/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Day      Daytime Phone #