


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000006207 1. Entity Name CARROUSEL BUILDINGS TECHNOLOGY MANAGEMENT, LLC	
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Principal Place of Business 110 SKIPPER AVE. FT. WALTON BEACH, FL 32547	Mailing Address 110 SKIPPER AVE. FT. WALTON BEACH, FL 32547
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04062006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3014247	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

PYBUS, MICKEY R
 110 SKIPPER AVE.
 FT. WALTON BEACH, FL 32547

DO NOT WRITE IN THIS SPACE

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 May 1, 2006**


9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	PYBUS, MICKEY R
STREET ADDRESS	110 SKIPPER AVE.
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547
TITLE	MGR
NAME	SALMON, HAROLD J
STREET ADDRESS	110 SKIPPER AVE.
CITY-ST-ZIP	FT. WALTON BEACH, FL 32547
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:  **4/7/06** **850-864-2324**

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

MICKEY PYBUS