

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M98000001610

1. Entity Name
PRIMARY CAPITAL ADVISORS LC



FILED
Feb 21, 2006 08:00 AM
Secretary of State

Principal Place of Business
2060 MT. PARAN ROAD, SUITE 101
ATLANTA, GA 30327

Mailing Address
2060 MT. PARAN ROAD, SUITE 101
ATLANTA, GA 30327



02092006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
58-2119340

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PENDLETON, WILLIAM B 2060 MT. PARAN ROAD, SUITE 101 ATLANTA, GA 30327
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR THOMPSON, FARON G 2060 MT. PARAN ROAD, SUITE 101 ATLANTA, GA 30327
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PHELPS, GEORGE S 2100 RIVEREDGE PARKWAY, SUITE 950 ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR HOLMES, DAVID 2100 RIVEREDGE PARKWAY, SUITE 950 ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR N/A, N/A N/A N/A, NA N/A
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR N/A, N/A N/A N/A, NA N/A

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03/04/06-80045-005 55.00

**DO NOT WRITE
IN THIS SPACE**

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:

2-14-06