


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000050058 1. Entity Name 1501 SECOND STREET LLC	
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Principal Place of Business 4130 BOCA POINTE DRIVE SARASOTA, FL 34238	Mailing Address 4130 BOCA POINTE DRIVE SARASOTA, FL 34238
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01052006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1307069	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

HAUTAMAKI, RAYMOND D
4130 BOCA POINTE DRIVE
SARASOTA, FL 34238

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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 re-registering) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HEUTAMAKI, RAYMOND D 4130 BOCA POINTE DR SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAUTAMAKI, ANN L 4130 BOCA POINTE DR SARASOTA, FL 34238
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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: *Ann L. Hautamaki* *ANN L. HAUTAMAKI* *1-5-06 941-925-4802*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #