## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000046448

1. Entity Name

QUAY DOCK ROAD PROPERTIES, L.L.C.



FILED
Jan 17, 2006 08:00 AM
Secretary of State

Principal Place of Business

3545 OCEAN DRIVE, SUITE 201 VERO BEACH, FL 32963 Mailing Address

3545 OCEAN DRIVE, SUITE 201 VERO BEACH, FL 32963



## DO NOT WRITE IN THIS SPACE

01042006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1370358 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LLOYD, ROBIN A SR.ESQ. 3545 OCEAN DRIVE, SUITE 201 VERO BEACH, FL 32963

STREET ADDRESS C)TY -ST-ZIP

## DO NOT WRITE IN THIS SPACE

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8. The above the obligat	named entity submits this statement for the purpose of chan ions of registered agent.	iging its registere	ed office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accep	
SIGNATURE	Signature, typed or printed name of registerod agent and title if applicable	(NOTE Registered	Agent signature required when reinstating)	DATE	
F	lling Fee is \$50.00 ue by May 1, 2006			·	
9.	MANAGING MEMBERS/MANAGERS		<del>, </del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MOSS, GEORGE 2350 QUAY DOCK ROAD VERO BEACH, FL 32967			U00000398421	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MOSS, JOYCE 2350 QUAY DOCK ROAD VERO BEACH, FL 32967			01/20/06-80004-006 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		IN	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME		,	1		

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 it limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #