## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Principal Place of Business

1. Entity Name

Mailing Address

2809 WEST WATERS AVENUE TAMPA, FL 33614

ROCAR HOLDINGS, L.L.C.

DOCUMENT # L99000004985

2809 WEST WATERS AVENUE TAMPA, FL 33614

**FILED** Feb 20, 2006 08:00 AM **Secretary of State** 



DO NOT WRITE IN THIS SPACE

02072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3644418

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CARTHY, JOHN J 2809 WEST WATERS AVENUE TAMPA, FL 33614

SIGNATURE: ∠

SIGNATURE AND TYPED OR

## DO NOT WRITE IN THIS SDACE

2/16/06

		ill ill	NO OFACE
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 purilod name of registered agent and title if applicable. (ROTE: Registered Agent signature required when reinstating). DATE			
		(12 to 12 date of our all more refer to must be setting)	JAIL
Filing Fee is \$50.00 Due by May 1, 2006		1/0/0000440919	
9.	MANAGING MEMBERS/MANAGERS		3 <del>3/83/86-88011-813-50.88</del>
TITLE NAME STREET ADDRESS CITY -ST - ZIP	MGRM CARTHY, JOHN J 2809 WEST WATERS AVENUE TAMPA, FL 33614		
HILE NAME SIDEET ADDRESS CITY-ST-ZIP	MGRM ROGAL, PHILLIP J 2809 WEST WATERS AVENUE TAMPA, FL 33614		
TITLE NAME STREET ADDRESS CHY-ST-ZIP		DO N	OT WRITE
HILLE HAME STREET ADDRESS CATY - ST - ZIP		IN TH	IIS SPACE
NAME STREET ADDRESS GITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 cettly, that I am a managing member or manager of the limited liability company as the receives or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

GNING WANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE