

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000103217

**FILED**  
**Mar 15, 2006**  
**Secretary of State**

**Entity Name:** 1250 MAIN L.L.C.

**Current Principal Place of Business:**

2630 WEST BAY DR.  
SUITE 105  
BELLEAIR BLUFFS, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

2630 WEST BAY DR.  
SUITE 105  
BELLEAIR BLUFFS, FL 33770 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KOLITSOPOULOS, GEORGE M  
2630 WEST BAY DR.  
SUITE 105  
BELLEAIR BLUFFS, FL 33770 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KOLITSOPOULOS, TINA  
Address: 2630 WEST BAY BLVD.  
City-St-Zip: BELLEAIR BLUFFS, FL 33770 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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:** TINA KOLITSOPOULOS                      MGRM                      03/15/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date