

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029367

Entity Name: LAB PROPERTIES, LLC

FILED
Apr 06, 2006
Secretary of State

Current Principal Place of Business:

7610 KNIGHTWING CIRCLE
FORT MYERS, FL 339127328

New Principal Place of Business:

Current Mailing Address:

7610 KNIGHTWING CIRCLE
FORT MYERS, FL 339127328

New Mailing Address:

FEI Number: 20-1317552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEETE, RHONDA J
7610 KNIGHTWING CIRCLE
FORT MYERS, FL 339127328 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: MGR () Delete
Name: LEETE, MARK D
Address: 7610 KNIGHTWING CIRCLE
City-St-Zip: FORT MYERS, FL 339127328

Title: MGRM () Delete
Name: BROCCOLO, THOMAS G
Address: 7101 APPLEBY DRIVE
City-St-Zip: NAPLES, FL 341048540

Title: MGRM () Delete
Name: ASHLEY, MICHAEL
Address: 624 ST. LUCIE CRESCENT
City-St-Zip: STUART, FL 34994

Title: MGRM () Delete
Name: BROCCOLO, GAY L
Address: 7101 APPLEBY DRIVE
City-St-Zip: NAPLES, FL 341048540

Title: MGRM () Delete
Name: ASHLEY, HOLLY
Address: 624 ST. LUCIE CRESCENT
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES:

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

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

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

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

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: MARK D. LEETE

MR.

04/06/2006

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