2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

AZZARELLI, THOMAS J

2904 BAYSTONE COURT

TAMPA, FL 33602

TAMPA, FL 33611

KING, GUY III

MGRM

100 W. KENNEDY BLVD. #720

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

FILED Jan 18, 2006 8:00 am Secretary of State

☐ Change

☐ Change

Addition

☐ Addition

| DOCUN 1. Entity Name PLATT PL | | | | | | 5 007 ****5 | 0.00 | | |
|--|--|-----------------------------|----------------------------|-----|---|----------------------|---------------|-----------------------------|------------|
| Principal Place | of Business | Mailing Address | | | | 200 | 0124 | 4 | |
| 100 W. KENN | EDY BLVD. | 100 W. KENNEDY BLVD. | | | | 200 | , • | | |
| STE. 720 TAMPA. FL 3 | 2002 | STE. 720 TAMPA. FL 33602 | | | | | | | |
| | | | | | | | | | |
| Principal Pla | 8th 5+ | | | | | | | | |
| Suite, Apt. | #, etc. | Suite, Apt. #. etc. | | | 01042006 | Chg-LLC | CR2E | 083 (11/05) | |
| City & State | | Tampa, f | -C | | 4. FEI Numb 59-361 | | | | Applicable |
| 3360 | Y Country A | 3364 | Country | | | of Status Desired | | \$5.00 Addi Fee Required | |
| 6. Name and Address of Current Registered Agent Name | | | | | 7. Name and Address of New Registered Agent | | | | |
| TAMPA, FL 33602 | | | | | (P.O. Box Number is Not Acceptable) V. 18th St. Suft A | | | | |
| | | -pa_ | | F | _ | -04 | | | |
| the obliget | named entity submits this statement for ons of registe ed agent. Signalifie, typed or and name of registered agent a | | gistered office or | t. | Azza | eth, in the State of | Florida. I al | tamiliar with, a | and accept |
| - Fi | ling Fee is \$50.00_ ue by May 1, 2006 | | | | | | | payable to ment of State | |
| 9. | MANAGING MEMBE | RS/MANAGERS | 10. | | | ADDITION | IS/CHANG | | |
| TITLE | MGRM | ☐ Delete | TITLE NAME | | | | | ☐ Change | Addition |
| NAME STREET ADDRESS | KING, DOUG W 4504 DREXEL ROAD | | STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | LAND O LAKES, FL 34639 | | CITY-ST-ZIP | | | | | | |
| TITLE | MGRM | ☐ Delete | TITLE | | | | | □¥ Change | ■ Addition |
| NAME | AZZARELLI PROPERTIES, INC. | | NAME | 900 | C N. | 184 St. | Sur | te A | |
| STREET ADDRESS CITY-ST-ZIP | 100 W. KENNEDY BLVD., STE. 1 TAMPA, FL 33602 | 720 | STREET ADDRESS CITY-ST-ZIP | Tar | _ | FL 3 | 3601 | • • • | |
| TITLE | MGRM | ☐ Delete | TITLE | | | , | | ☐ Change | Addition |
| NAME | FARRIOR, REX J III | | NAME | | | | | | |
| STREET ADDRESS | STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | TAMPA, FL 33606 | | CITY-\$T-ZIP | | | | | | |
| TITLE | P | ☐ Delete | TITLE | | | | | Change | Addition |

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.

NAME

TITLE

NAME

☐ Delete

☐ Delete

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE