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

## DOCUMENT # L00000002637

1. Entity Name

SUROCO INVESTMENTS ENTERPRISES, L.L.C.



**FILED** Jan 23, 2006 08:00 AN Secretary of State

Principal Place of Business

8284 VICO COURT SARASOTA, FL 34240 Mailing Address 8284 VICO COURT SARASOTA, FL 34240

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01182006 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 65-0918528 Not Applicable 

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

CHAPNICK, BRUCE P ICARD, MERRILL, TIMM, FUREN 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237-6091

NAME STREET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	iging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agont and title if applicable.		(NOTE Registered Agent signature required when reinstating)	DATE	
Fi	iling Fee is \$50.00 ue by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUTTER, STEPHEN F 1763 APEX RD SARASOTA, FL 34240		ບວວວວລອງຂອງ ບຂ/ບ1/ບຣິ-ຮິບບປ4-ນວຂ 50.ບວ <b>DO NOT WRITE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUTTER, MELINDA D 1763 APEX RD SARASOTA, FL 34240			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE		i i		

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.

SIGNATURE ED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #