

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012871

FILED
Mar 22, 2006
Secretary of State

Entity Name: STRATEGY CAPITAL OF FLORIDA, LLC

Current Principal Place of Business:

8099 PALOMINO DRIVE
NAPLES, FL 34113

New Principal Place of Business:

28698 ALESSANDRIA CIRCLE
BONITA SPRINGS, FL 34135

Current Mailing Address:

8099 PALOMINO DRIVE
NAPLES, FL 34113

New Mailing Address:

P.O. BOX 366638
BONITA SPRINGS, FL 34136 US

FEI Number: 59-3679380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, DAVID C
8099 PALOMINO DRIVE
NAPLES, FL 34113 US

Name and Address of New Registered Agent:

NOVATT, JEFF M ESQ
821 FIFTH AVENUE SOUTH
201
NAPLES, FL 34102 US

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: JEFF M. NOVATT

03/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAPITAL FUNDING & MA, NAGEMENT CORP.
Address: 8099 PALOMINO DRIVE
City-St-Zip: NAPLES, FL 34113

Title: MGRM () Delete
Name: JAZZPER CAPITAL INC.,
Address: 3185 HORSESHOE DR., S.
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CAPITAL FUNDING & MA, NAGEMENT CORP.
Address: 28698 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MGRM (X) Change () Addition
Name: JAZZPER CAPITAL INC.,
Address: 28698 ALESSANDRIA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: JOHN H. PERKINS

PD

03/22/2006

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