2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# L00000013981

Entity Name: MANATEE ZONE, L.L.C.

Current Principal Place of Business:

214 ORANGE AVENUE
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

214 ORANGE AVENUE
FORT PIERCE, FL 34950

New Mailing Address:

FEI Number: 65-1050706 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILKINS, BARBARA
214 ORANGE AVENUE
FORT PIERCE, FL 34950 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: WILKINS, BARBARA
Address: 2700 N A1A #303
City-St-Zip: FT PIERCE, FL 34949

Title: M (X) Delete
Name: HALLMARK, SANNA
Address: 209 SW AIRVIEW AVENUE
City-St-Zip: PORT ST LUCIE, FL 34984

ADDITIONS/CHANGES:

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: BARBARA WILKINS MGR 04/17/2006

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