

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 05, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L00000014633

1. Entity Name  
333 LLC



Principal Place of Business  
116 GULFSTREAM ROAD  
PALM BEACH, FL 33480-4708

Mailing Address  
116 GULFSTREAM ROAD  
PALM BEACH, FL 33480-4708



01062006 No Chg-LLC

CR2ED83 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1059264

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

WOOD, ROBERT K  
116 GULFSTREAM ROAD  
PALM BEACH, FL 33480-4708

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

000000493233  
04/19/06-80097-010 55.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	WOOD, ROBERT K
STREET ADDRESS	116 GULFSTREAM ROAD
CITY- ST- ZIP	PALM BEACH, FL 334804708
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Robert K. Wood*

3/31/06

561-659-5996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #