2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000006469

1. Entity Name

SOUTHPORT PROPERTY INVESTMENTS, LLC

Principal Place of Business 10205 SOUTHERN BLVD.

ROYAL PALM BEACH, FL 33411

Mailing Address

10205 SOUTHERN BLVD. ROYAL PALM BEACH, FL 33411

FILED Jan 12, 2006 08:00 AM Secretary of State



01102006No Chg-LLC

CR2E083 (11/05)

Applied For 4. FEI Number 65-1096923 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

TERRANOVA, JOHN A 13882 COLUMBINE AVENUE WELLINGTON, FL 33414

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 The above the obligat 	we 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 ations of registered agent.					
SIGNATURE		<u> </u>				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	. DATE .	- -		
Fi D:	lling Fee is \$50.00 ue by May 1, 2006					
9.	MANAGING MEMBERS/MANAGERS					
ITTLE	MGRM			i		
NAME	NICHOLAS, CHILLEMI J	i i				
STREET ADDRESS	10205 SOUTHERN BLVD	1	1650'0'80'95'365 1153'5			
CITY-ST-ZIP	ROYAL PALM BEACH, FL 33411	_ •• _ • •	100000384192]		
TITLE	MGRM		01/17/06-80002-003 50.00			
NAME	JOHN, TERRANOVA	<u>}</u>				
STREET ADDRESS	13882 COLUMBINE AVE					
City-St-Zip	WEST PALM BEACH, FL 33414					
TITLE	MGRM			i		
teer-	MARK BOMANIELL	1		i		

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u.	I hereby certify that the information supplied with the him does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information
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	more and any report is true and appendic and was my significant state are same legal effect as it made those datiff, that I am a managing member of managing or ma
	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 firnited liability company or the receiver or trusted empowered to execute this report as required by Chapter 608, Florida Statutes.
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	the state of the s

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS CTY-ST-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

4240 FOXVIEW COURT

LAKE WORTH, FL 33467