

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010189

Entity Name: SUZAN S. NOA, LLC

FILED
Jan 24, 2006
Secretary of State

Current Principal Place of Business:

2203 S.E. 8TH AVENUE
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 151060
CAPE CORAL, FL 33915

New Mailing Address:

FEI Number: 65-1116054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NOA, HECTOR M
2203 SE 8TH AVENUE
CAPE CORAL, FL 33990 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: NOA, SUZAN S
Address: 2203 SE 8TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NOA, SUZAN S PRES
Address: 2203 SE 8TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 US

Title: MGR () Change (X) Addition
Name: NOA, HECTOR M TREASUR
Address: 2203 SE 8TH AVENUE
City-St-Zip: CAPE CORAL, FL 33990 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: SUZAN S NOA

PRES

01/24/2006

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