

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90026 046 ****50.00

20044373



03302006 Chg-LLC CR2E083 (11/05)

4. FCI Number
59-3741571

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FINLAY HOLDINGS, INC.
4300 MARSH LANDING BLVD., STE 101
JACKSONVILLE BEACH, FL 32250

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____ DATE _____
Signature, handwritten name of registered agent, and title (if applicable) (FIDELITY Registered Agent Signature Required with this filing)

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY ST ZIP	MGRM FINLAY GP HOLDINGS, LTD. 4300 MARSH LANDING BLVD., SUITE 101 JACKSONVILLE BEACH, FL 32250	☐ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete
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10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	Vice-President. Charles D. Robbins 4300 Marsh Landing Blvd #101 Jacksonville Beach, Fla. 32250	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition

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: _____

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

Christopher C. Finlay - Mgrm 3/31/06

Date of Filing