# 2006 LIMITED LIABILITY COMPANY
## ANNUAL REPORT

**DOCUMENT # L02000011580**

1. Entity Name
TUSCAWILLA 54TH, LLC

| Principal Place of Business | Mailing Address |
|---|---|
| 6654 78TH AVE N<br>PINELLAS PARK, FL 33781 | 6654 78TH AVE N<br>PINELLAS PARK, FL 33781 |

## DO NOT WRITE IN THIS SPACE

02072006 No Chg-LLC          CR2E083 (11/05)

| 4. FEI Number | Applied For |
|---|---|
| 03-0449951 | Not Applicable |

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

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

COCKEY, PRESTON O JR.
201 NORTH FRANKLIN STREET
SUITE 3410
TAMPA, FL 33602

## 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 reinstating)          DATE

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

**9.          MANAGING MEMBERS/MANAGERS**

| TITLE | MGR |
|---|---|
| NAME | YEPES, CARLOS A |
| STREET ADDRESS | 6654 78TH AVE N |
| CITY-ST-ZIP | PINELLAS PARK, FL 33781 |

| TITLE | |
|---|---|
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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| CITY-ST-ZIP | |

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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: _____          4-11-06  727-53C-8C89

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE          Date          Daytime Phone #