## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000015178

Entity Name: 8792, LLC

Address:

BOX 231

City-St-Zip: LAKE WALES, FL 33859

FILED Mar 30, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8792 SR-79 SUITE A BRADENT	0 E. ON, FL 34202				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
8792 SR-70 E. SUITE A BRADENTON, FL 34202			8792 SR-70 E. SUITE A (C/O RAYMOND JAMES) BRADENTON, FL 34202		
FEI Number:	04-3693551	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
8792 SR- 7 BRADENT	DAVID M CPA 70 EAST, SUITE ON, FL 34202	US	ournose of changing its registers	d office or registered agent, or both	
in the State		ubilitis tilis statement for the p	ourpose of changing its registere	d office of registered agent, or both	
SIGNATUR	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () SNYDER, DAVID 6163 AVIARY CT BRADENTON, FI	=	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGR () GREGORY, PAC 13114 RAVEN T BRADENTON, FI	ERRAC	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGR () SAMUEL, UPDIK BOX 231 LAKE WALES, F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	MGR () MONICA, UPDIK	Delete E M	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DAVID M. SNYDER MGR 03/30/2006