

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018972

FILED  
Jan 04, 2006  
Secretary of State

Entity Name: PDR PARTNERS, LLC

## Current Principal Place of Business:

3815 N US HIGHWAY ONE  
SUITE 118  
COCOA, FL 32926

## New Principal Place of Business:

## Current Mailing Address:

3815 N US HIGHWAY ONE  
SUITE 118  
COCOA, FL 32926

## New Mailing Address:

FEI Number: 76-0705888

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAROTHERS, BARRY ESQ.  
4400 PGA BLVD.  
SUITE 800  
PALM BEACH GARDENS, FL 33410 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: MGRM ( ) Delete  
Name: CAROTHERS, GARY  
Address: 1242 SW KNOLLWOOD DR  
City-St-Zip: PALM CITY, FL 34990

Title: MGR ( ) Delete  
Name: EDWARDS, MICHAEL K  
Address: 249 CENTER STREET #1B  
City-St-Zip: JUPITER, FL 33458

Title: MGR ( ) Delete  
Name: CAROTHERS, SHARY M  
Address: 4355 COMFORT STREET  
City-St-Zip: COCOA, FL 32927

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SHARY CAROTHERS

MGR

01/04/2006

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