

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 11, 2006 08:00 AM
Secretary of State**

DOCUMENT # L02000023791

1. Entity Name

O'CARROLL PROPERTIES, LLC



Principal Place of Business

5108 NORTH SEMINOLE AVENUE
TAMPA, FL 33603

Mailing Address

5108 NORTH SEMINOLE AVENUE
TAMPA, FL 33603



01092006 No Chg-LLC

CRZE083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

04-3744602

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHRISTALDI, RONALD A
101 EAST KENNEDY BOULEVARD, STE 3400
TAMPA, FL 33602

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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**

1100000383045
01/12/06-80037-012 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	O'CARROLL, MELANEY
STREET ADDRESS	5108 N SEMINOLE AVE
CITY-ST-ZIP	TAMPA, FL 33603
TITLE	MGR
NAME	O'CARROLL, EDMUND M
STREET ADDRESS	5108 N SEMINOLE AVE
CITY-ST-ZIP	TAMPA, FL 33603
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

Melane O'Carroll

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

1-9-06

Date

813-238-0027

Daytime Phone #