2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 17, 2006 08:00 AM Secretary of State

239-262-245)

ANNUAL KEPUKI				Secretary of State
DOCL	JMENT # L0200002	5819		Secretary of State
1. Entity Nac	me _			
PARKC	ENTRAL NORTH, LLC			
				}
Principal Pla	ce of Business	Mailing Address		1
,	INGLINE DRIVE	317 MOORINGLINE DRIVE		
NAPLES, FL		NAPLES, FL 34102		
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				04102006No Chg-LLC
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			ì	42-1502184 Not Applicable
			į	5. Certificate of Status Desired \$5.00 Additional
	6. Name and Address of Curren	t Ronistered Agent	 	Fee Required
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GREGORY, C. NEIL			}	DO NOT WRITE
TRIANON CENTER, THIRD FLOOR 850 PARK SHORE DRIVE				- - -
	FL 34103		:	IN THIS SPACE
				:
* The above	- named antitu or hanite this etatement f	for the aureana of changing the registers	office or register	and a bath to the Chair of Flering Law familiar with and appear
 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	t and title if applicable (NOTE Registere)	Agent signature required	where reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2006				
bue by may 1, 2006				
Q.	MANAGING MEMB	ERS/MANAGERS	<u> </u>	
TITLE	MGRM		i i	
NAME STREET ADDRESS	BOZZO, MICHAEL J SR. 317 MOORINGLINE DRIVE	,	.	U00000516141
CITY-ST-ZIP	NAPLES, FL 34102		<u> </u>	04/29/06-80238-019 50.00
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11. I hereby c	ertify that the information supplied with	n this filing does not qualify for the exe	mptions contained	in Chapter 119, Florida Statutes. I further centify that the information
11. I hereby certify that the information supplied with this filling 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.				