

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90037 013 ****50.00

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04192006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L02000026001 1. Entity Name PENNOCK BUSINESS CENTER, L.L.C.					
Principal Place of Business 501 MAPLEWOOD DRIVE JUPITER, FL 33458			Mailing Address PO BOX 3351 JUPITER, FL 33469		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 56-2297240	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent RATHKE, RICHARD C 501 MAPLEWOOD DR. JUPITER, FL 33469			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RATHKE, RICHARD C 501 MAPLEWOOD DR. JUPITER, FL 33469	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mgrm Richard C. Rathke (Trustee) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 501 Maplewood Drive Jupiter, FL 33458	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GORE, GEARE 501 MAPLEWOOD DR. JUPITER, FL 33458	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mgrm Gearel Gore (Trustee) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 501 Maplewood Drive Jupiter, FL 33458	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mgrm Linda Gore (Trustee) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 501 Maplewood Drive Jupiter, FL 33458	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mgrm Cristina Bishop <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9142 East Ridge Road Golden, CO 80403	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>R.C. Rathke</u> R.C. RATHKE			4/20/06 5617460980		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		