

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jul 25, 2006
Secretary of State**

DOCUMENT# L02000026133

Entity Name: SOUTH FLORIDA ASSET MANAGEMENT, LLC

Current Principal Place of Business:

New Principal Place of Business:

529 BROAD AVE. SOUTH
NAPLES, FL 34102

Current Mailing Address:

New Mailing Address:

529 BROAD AVE. SOUTH
NAPLES, FL 34102

FEI Number: 43-2023946 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ALWARD, GRANT P
529 BROAD AVE. SOUTH
NAPLES, FL 34102 US

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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: ALWARD, GRANT P
Address: 529 BROAD AVE. SOUTH
City-St-Zip: NAPLES, FL 34102

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: GRANT P ALWARD

MGR

07/25/2006

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