

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026193

Entity Name: 102 MLK, LLC

FILED
Jan 09, 2006
Secretary of State

Current Principal Place of Business:

120 E. MARTIN LUTHER KING JR. BLVD.
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

120 E. MARTIN LUTHER KING JR. BLVD.
TAMPA, FL 336103

New Mailing Address:

FEI Number: 43-1978678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TOLBERT, ROBERT D JR
120 E. MARTIN LUTHER KING JR. BLVD.
TAMPA, FL 33603 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: GEEHR, JOHN R
Address: 120 E. MARTIN LUTHER KING JR. BLVD.
City-St-Zip: TAMPA, FL 33603

Title: MGRM () Delete
Name: BETTENCOURT, JAMES H
Address: 120 E. MARTIN LUTHER KING JR. BLVD.
City-St-Zip: TAMPA, FL 33603

Title: MGRM () Delete
Name: TOLBERT, ROBERT D JR
Address: 120 E. MARTIN LUTHER KING JR. BLVD.
City-St-Zip: TAMPA, FL 33603

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: ROBERT D. TOLBERT, JR.

MGR

01/09/2006

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