

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000027862 1. Entity Name SIESTA KEY CAPITAL MANAGEMENT, LLC	
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Principal Place of Business 1162 HORIZON VIEW DR SARASOTA, FL 34242	Mailing Address 1162 HORIZON VIEW DR SARASOTA, FL 34242
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DO NOT WRITE IN THIS SPACE

01302006 No Chg-LLC

CRZE083 (11/05)

4. FEI Number 13-4217961	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fees Required

6. Name and Address of Current Registered Agent STRMEL, DAMIR 1162 HORIZON VIEW DR SARASOTA, FL 34242

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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 resigning) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STRMEL, DAMIR 1162 HORIZON VIEW DR SARASOTA, FL 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STRMEL, PEGGYANN W 1162 HORIZON VIEW DR SARASOTA, FL 34242
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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 606, Florida Statutes.

SIGNATURE: Damir Strmel **DAMIR STRMEL** 4/11/06 (941) 349-6289
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #