

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000028287

1. Entity Name
3055 5TH AVENUE NORTH, L.L.C.



Principal Place of Business
3055 5TH AVE. NORTH
ST PETERSBURG, FL 33713

Mailing Address
3055 5TH AVE. NORTH
ST PETERSBURG, FL 33713



04242006 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
11-3659958

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GASSMAN, ALAN S
1245 COURT ST., STE. 102
CLEARWATER, FL 33756

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IN THIS SPACE

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 reappointing)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
DB HOLDINGS, L.L.C.
3055 5TH AVE. NORTH
ST PETERSBURG, FL 33713

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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05/13/06-80027-015 50.00

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IN THIS SPACE

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Ongoing Phone #

Signature: [Signature] Deborah Bart
Date: 4/26/06
Ongoing Phone #: 727-323-3838