

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jan 30, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000034939					
1. Entity Name INLET PLAZA, LLC					
Principal Place of Business 1045 EAST ATLANTIC AVENUE #311 DELRAY BEACH FL 33483			Mailing Address 810 TANGERINE WAY DELRAY BEACH FL 33483		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEt Number 52-2388890	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent EARNHART, CRAIG D 70 SOUTHEAST 4TH AVENUE DELRAY BEACH FL 33483			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 _____ (Signature, typed or printed name of registered agent and title if applicable)					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006					
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KENNEMER, JR, A. HOPKINS 810 TANGERINE WAY DELRAY BEACH FL 33483	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	☐ Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			U000000406342 02/07/06-80109-015 50.00		
SIGNATURE: _____			1-26-05 243-3437		