## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000034996

Entity Name: SPLASH REAL ESTATE, LLC

14898 CRESCENT COVE DRIVE

FT. MYERS, FL 33908

Address:

City-St-Zip:

FILED Apr 12, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 14898 CRESCENT COVE DRIVE FORT MYERS, FL 33908 **Current Mailing Address: New Mailing Address:** 14898 CRESCENT COVE DRIVE FORT MYERS, FL 33908 FEI Number: 16-1650760 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARTMANIS, CAROL 14898 CRESCENT COVE DRIVE FORT MYERS, FL 33908 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: MGRM Title: () Change () Addition () Delete HARTMANIS, CAROL Name: Name: Address: 14898 CRESCENT COVE DRIVE Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition Name: HARTMANIS, ELENA Name: HARTMANIS, ELENA Address: 14898 CRESCENT COVE DR. Address: 75 ATLANTIC GROVE WAY City-St-Zip: FT. MYERS, FL 33908 City-St-Zip: DELRAY BEACH, FL 33444 Title: MGRM () Delete Title: () Change () Addition CARANETTI, THOMAS Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CAROL HARTMANIS MGRM 04/12/2006