


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**May 11, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # L03000001251</b> 1. Entity Name <b>MUSHMENA PROPERTIES I, LLC</b>		
Principal Place of Business <b>305 N. MANGOUSTINE AVENUE, SUITE 200 SANFORD, FL 32771</b>	Mailing Address <b>305 N. MANGOUSTINE AVENUE, SUITE 200 SANFORD, FL 32771</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>MUSHMEENA MANAGEMENT LLC 305 N. MANGOUSTINE AVENUE, SUITE 200 SANFORD, FL 32771</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MUSHMEENA MANAGEMENT, LLC 305 N. MANGOUSTINE AVENUE, SUITE 200 SANFORD, FL 32771	
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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 608, Florida Statutes.  <b>SIGNATURE: <i>Shayna</i> SHAYNAZ CHIDA M.D. 4-27-06 407 321-1425</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		



04272006No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

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05/20/06-80041-007 50.00

**DO NOT WRITE  
IN THIS SPACE**