2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 14, 2006 08:00 Al Secretary of State

DOCUMENT # L0300001745 1. Entity Name STUDIO 7 ARCHITECTURE, PL		
Principal Place of Business	Mailing Address	
508 CENTRAL AVE. Sarasota, Fl. 34236	508 Central Ave. Sarasota, Fl. 34236	



DO NOT WRITE IN THIS SPACE

01052006 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 06-1674568 Not Applicable

5. Certificate of Status Desired 55.00 Additional Fee Required

5. Name and Address of Current Registered Agent
GAUBATZ, BRAD W

508 CENTRAL AVE SARASOTA, FL 34236

CITY-ST-ZIP

DO NOT WRITE 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 reinstating)	DATE	
Fi D	ling Fee is \$50.00 ue by May 1, 2006		//000005 09262 04/28/06-80036-005 50.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STUDIO 7 ARCHITECTURE, INC. BRAD WAYNE GAUBATZ PRES/508 CENTRAL AVE SARASOTA, FL 34236			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DREHER, ERNEST C III 508 CENTRAL AVENUE SARASOTA, FL 34236			
TITLE NAME STREET ADDRESS CITY-SY-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS				

11. I hereby certify that the information supplied with this filing does not quality 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: Ernest C. Dreher 4-10-06 941-365-6400 signature and typed or printed name of signing managing member, or authorized representative date of date days the phone a