

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000003893

1. Entity Name
LONESTAR WAREHOUSE INVESTORS, LLC



Principal Place of Business

**2008 RIVERSIDE AVE
SUITE 100
JACKSONVILLE, FL 32204**

Mailing Address

**2008 RIVERSIDE AVE
SUITE 100
JACKSONVILLE, FL 32204**



01162006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
27-0044888

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**RODANTE, SAM W
2050 FORBES STREET
JACKSONVILLE, FL 32204**

**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 reinstalling)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	RODANTE, SAM W
STREET ADDRESS	2008 RIVERSIDE AVE, SUITE 100
CITY-ST-ZIP	JACKSONVILLE, FL 32204
TITLE	MGRM
NAME	KENNEDY, DAVID A
STREET ADDRESS	2910 W. BAY TO BAY BLVD.
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	VP
NAME	KILE, NOEL
STREET ADDRESS	7350 S. TAMiami TRAIL
CITY-ST-ZIP	SARASOTA, FL 34231
TITLE	VP
NAME	FOSTER, FRANK
STREET ADDRESS	PO BOX 2762
CITY-ST-ZIP	LAKE LAND, FL 33808
TITLE	VP
NAME	ARINGTON, LYNN
STREET ADDRESS	2380 POTTS RD.
CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	S
NAME	JENKINS, DONNA
STREET ADDRESS	2910 W. BAY TO BAY BLVD.
CITY-ST-ZIP	TAMPA, FL 33629

000000428285
02/21/06-80042-006 50.00

**DO NOT WRITE
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

Daytime Phone

SAM W. Rodante

1-30-06

904-384-9961