

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90203 027 ****50.00

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03032006 Chg-LLC CR2E083 (11/05)

DOCUMENT # L03000007555 1. Entity Name METROPOLITAN MANAGEMENT & INVESTORS, LLC					
Principal Place of Business 76 S. LAURA STREET, SUITE 1700 JACKSONVILLE, FL 32202				Mailing Address 76 S. LAURA STREET, SUITE 1700 JACKSONVILLE, FL 32202	
2. Principal Place of Business 76 S. Laura Street		3. Mailing Address 76 S. Laura Street		4. FEI Number 41-2085596 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
Suite, Apt. #, etc. Suite 2110		Suite, Apt. #, etc. Suite 2110			
City & State Jacksonville, Florida		City & State Jacksonville, Florida			
Zip 32202	Country USA	Zip 32202	Country USA		
6. Name and Address of Current Registered Agent FREED, MICHAEL R 76 S. LAURA STREET, SUITE 1700 2110 JACKSONVILLE, FL 32202				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MANNA, ANTHONY S 76 S. LAURA STREET, STE 1700 2110 JACKSONVILLE, FL 32202	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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:		Anthony S. Manna		3/10/06	330-253-5060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	



BRENNAN, MANNA & DIAMOND, LLC
ATTORNEYS & COUNSELORS AT LAW

ATTACHMENT

20015823

#LO3 000007555

Anna-Karina Dragolich
Phone: 330-253-5060
Fax: 330-253-1977
Email: akdragolich@bmdllc.com

March 10, 2006

Florida Department of State
Division of Corporations
PO Box 6478
Tallahassee, FL 32314

RE: Metropolitan Management & Investors, LLC

Dear Sir or Madam:

Enclosed herewith please find the 2006 Annual Report for the above-referenced entity, along with a check in the amount of \$50.00 for the filing fee. Please file the same and return any receipts and/or certificates to me.

Thank you for your time and attention to this matter. Please feel free to contact me if you should have any questions.

Very truly yours,

A-K Dragolich

Anna-Karina Dragolich
Paralegal