

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90048 024 \*\*\*\*50.00

40020832



01182006No Chg-LLC CR2E083 (11/05)

4. FEI Number	Applied For
58-2676354	Not Applicable

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

**DOCUMENT # L03000008381**  
 1. Entity Name  
 INDUSTRIAL OPPORTUNITY, LLC



Principal Place of Business 3100 OPPORTUNITY COURT SOUTH DAYTONA, FL 32119	Mailing Address 200 E. GRANADA BLVD., STE. 200 ORMOND BEACH, FL 32176
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  
 SALBY, DWIGHT C  
 SELBY REALTY, INC  
 200 E. GRANADA BLVD., #200  
 ORMOND BEACH, FL 32176

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SELBY, DWIGHT C 1535 OAK FOREST DR. ORMOND BEACH, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MILLER, SANFORD 28 BROAD RIVER ROAD ORMOND BEACH, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DARGAN, THOMAS H JR 140 JOHN ANDERSON DR. ORMOND BEACH, FL 32176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STRASSER, CHARLES L 1316 JOHN ANDERSON DR ORMOND BEACH, FL 32176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SACKS, DAVID 240 N. SEAGRAVE DAYTONA BEACH, FL 32115
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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 its receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Dwight C. Selby Date: 3/21/06 Daytime Phone #: 386-238-4456  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE