2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 10, 2006
Secretary of State

DOCUMENT# L03000015209

Entity Name: ROMAN ROSELAWN, LLC

Current Principal Place of Business:

9880 NE GASPARILLA PASS
BOCA GRANDE, FL 33921

New Principal Place of Business:

2960 S MCCALL AV
SUITE 210
ENGLEWOOD, FL 34223

Current Mailing Address:

PO BOX 1007
BOCA GRANDE, FL 33921

New Mailing Address:

PO BOX 522
BOCA GRANDE, FL 33921

FEI Number: 05-0568255 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAYLOR, BARBARA
9880 NE GASPARILLA PASS
BOCA GRANDE, FL 33921 US

Name and Address of New Registered Agent:

ROMAN, JULES
2960 S MCCALL AV
SUITE 210
ENGLEWOOD, FL 34224 US

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.

SIGNATURE: JULES ROMAN 03/10/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ROMAN, JULES
Address: 15268 BEAL-FRED DR.
City-St-Zip: CLIO, MI 48420

Title: MGRM ( ) Delete
Name: ROMAN, ANN
Address: 15268 BEAL-FRED DR.
City-St-Zip: CLIO, MI 48420

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ROMAN, JULES
Address: PO BOX 522
City-St-Zip: BOCA GRANDE, FL 33921

Title: MGRM (X) Change ( ) Addition
Name: ROMAN, ANN
Address: PO BOX 522
City-St-Zip: BOCA GRANDE, FL 33921

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JULES ROMAN MGMR 03/10/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date