

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018504

Entity Name: HOCKEY - M. C. - L.L.C.

**FILED**  
**Apr 30, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

158 S.E. 5TH STREET  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

158 S.E. 5TH STREET  
CAPE CORAL, FL 33990

**New Mailing Address:**

FEI Number: 93-1280018

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FISCHER, WALTRAUD  
158 S.E. 5TH STREET  
CAPE CORAL, FL 33990 US

**Name and Address of New Registered Agent:**

SCHMIDT, JUERGEN  
158 S.E. 5TH STREET  
CAPE CORAL, FL 33990 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: JUERGEN, SCHMIDT

04/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SCHMIDT, PETRA  
Address: 158 S.E. 5TH STREET  
City-St-Zip: CAPE CORAL, FL 33990

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PETRA, SCHMIDT

MGR

04/30/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date