2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000018839

1. Entity Name
LOFT OF SARASOTA, L.L.C.

Principal Place of Business	Mailing Address
2127 RINGLING BLVD., SUITE 102 SARASOTA, FL 34237	2127 RINGLING BLVD., SUITE 102 SARASOTA, FL 34237

DO NOT WRITE IN THIS SPACE

01042006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
65-1191072	Not Applicable

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

6. Name and Address of Current Registered Agent

VENABLE, JOSEPH P ·
1400 4TH AVENUE WEST
BRADENTON, FL 34205

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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 reinstating)   DATE

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

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	RIVOLTA, PIERO
STREET ADDRESS	215 ROBIN DRIVE
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ Piero Rivolta   4-15-06   941-954-0355

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #