

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018977

FILED  
Mar 25, 2006  
Secretary of State

Entity Name: STATEWIDE PROPERTIES, LLC

**Current Principal Place of Business:**

3624 SE 18TH AVE  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

3624 SE 18TH AVE  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 42-1597820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TROW, CHESTER J  
1 NE FIRST AVE, STE 303  
OCALA, FL 34470 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MIKULA, JAMES  
Address: 3624 SE 18TH AVE  
City-St-Zip: OCALA, FL 34471

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MIKULA, JAMES A  
Address: 3624 SE 18TH AVE  
City-St-Zip: OCALA, FL 34471

Title: MGR ( ) Change (X) Addition  
Name: MIKULA, JENNIFER L  
Address: 3624 SE 18TH AVE  
City-St-Zip: OCALA, FL 34471

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: JAMES A. MIKULA

MGRM

03/25/2006

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