

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020266

FILED  
Jan 09, 2006  
Secretary of State

Entity Name: MARDTAM HOLDINGS, LLC

**Current Principal Place of Business:**

5742 54 AVENUE N.  
KENNETH CITY, FL 33709 US

**New Principal Place of Business:**

**Current Mailing Address:**

10294 SHADY OAK LANE  
LARGO, FL 33777 US

**New Mailing Address:**

FEI Number: 42-1594080

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVID P. FOLKENFLIK, P.A.  
5742 54TH AVENUE N.  
KENNETH CITY, FL 33709 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: MGRM ( ) Delete  
Name: FOLKENFLIK, DAVID P  
Address: 5742 54TH AVENUE N.  
City-St-Zip: KENNETH CITY, FL 33709

Title: MGRM ( ) Delete  
Name: FOLKENFLIK, TAMI L  
Address: 5742 54TH AVENUE N.  
City-St-Zip: KENNETH CITY, FL 33709

Title: MGRM ( ) Delete  
Name: FOLKENFLIK, MARTIN R  
Address: 5742 54TH AVENUE N.  
City-St-Zip: KENNETH CITY, FL 33709

Title: MGRM ( ) Delete  
Name: FOLKENFLIK, MARILYN A  
Address: 5742 54TH AVENUE N.  
City-St-Zip: KENNETH CITY, FL 33709

**ADDITIONS/CHANGES:**

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

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

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

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: DAVID P. FOLKENFLIK

MGMR

01/09/2006

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