## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000023268

Entity Name: HBCU SPIRIT LLC

FILED Aug 01, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5165 FOXBRIDGE CR. #16 101 S OLD COACHMAN ROAD CLEARWATER, FL 33760

#114

CLEARWATER, FL 33765

**Current Mailing Address: New Mailing Address:** 

5165 FOXBRIDGE CR. #16 PO BOX 17538

CLEARWATER, FL 33760 CLEARWATER, FL 33762

FEI Number: 30-0122966 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DEPASS, ANTHONY DEPASS, ANTHONY 5165 FOXBRIDGE CR. #16 101 S OLD COACHMAN ROAD CLEARWATER, FL 33760 US #114

CLEARWATER, FL 33765 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: 08/01/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change ( ) Addition

DELASS, ANTHONY DEPASS, ANTHONY Name: Name: Address: 5165 FOX BRIDGE CR. #16 Address: 101 S OLD COACHMAN ROAD #114

City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: CLEARWATER, FL 33765

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: ANTHONY DEPASS **MGRM** 08/01/2006