

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029058

FILED
Apr 19, 2006
Secretary of State

Entity Name: MANATEE PROPERTY INVESTMENTS LLC

Current Principal Place of Business:

5311 52ND AVE. WEST
BRADENTON, FL 34210

New Principal Place of Business:

2905 10TH ST. W.
BRADENTON, FL 34205

Current Mailing Address:

5311 52ND AVE. WEST
BRADENTON, FL 34210

New Mailing Address:

2905 10TH ST. W.
BRADENTON, FL 34205

FEI Number: 61-1454660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRITY, JOHN J
5311 52ND AVE. WEST
BRADENTON, FL 34210 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: GARRITY, JOHN J
Address: 5311 52ND AVE. WEST
City-St-Zip: BRADENTON, FL 34210 US

Title: MGRM () Delete
Name: MUNN, FRED J
Address: 908 40TH AVE. WEST
City-St-Zip: BRADENTON, FL 34205 US

Title: MGRM () Delete
Name: JAY, STANLEY B
Address: 5104 54TH ST. WEST
City-St-Zip: BRADENTON, FL 34210 US

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:

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: JOHN J GARRITY

MGRM

04/19/2006

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