

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000032824

1. Entity Name
SHAMROCK PARTNERS, LLC



Principal Place of Business
**31 SE HARBOR POINT DRIVE
STUART, FL 34996**

Mailing Address
**31 SE HARBOR POINT DRIVE
STUART, FL 34996**



04102006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0753220

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BARATTA, ROBERT O
31 SE HARBOR POINT DRIVE
STUART, FL 34996**

**DO NOT WRITE
IN THIS SPACE**

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**

000000515288
04/29/06-80204-012 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BARATTA, ROBERT O
STREET ADDRESS	31 SE HARBOR POINT DRIVE
CITY - ST - ZIP	STUART, FL 34996
TITLE	MGR
NAME	BASSO, ANTHONY
STREET ADDRESS	3882 SW INWOOD PINES LANE
CITY - ST - ZIP	PALM CITY, FL 34990
TITLE	MGR
NAME	KLAUSNER, LAWRENCE
STREET ADDRESS	746 HAMPTON WOODS LAKE SW
CITY - ST - ZIP	VERO BEACH, FL 32962
TITLE	MGR
NAME	GILIBERTI, CATHERINE T
STREET ADDRESS	150 MAIN STREET
CITY - ST - ZIP	ROSLYN, NY 115762131
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Robert O. Baratta

Robert O. BARATTA

4/10/06 772-285-0950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #