2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000034891

1. Entity Name EE-PLAZA, L.L.C.

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

Principal Place of Business

STE. 206, 4000 N. FEDERAL HWY. BOCA RATON, FL 33431

Mailing Address

1000 OMNI BLVD. NEWPORT NEWS, VA 23606



03272006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 56-2396026

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

MACLAREN, LINDA O 798 S. FEDERAL HWY., STE. 100 BOCA RATON, FL 33432

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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 f	amiliar with, ar	id accept
	the obligations of registered agent.	•		
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(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

ANNUALIZA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA					
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ECONOMOS, NICHOLAS 4000 N FEDERAL HWY STE 206 BOCA RATON, FL 33431				
TITLE MAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
title Name Street address City-St-Zip					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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11. I hereby certify that the information supplied with this filling 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 shell 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 experie this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE

NICK ECONOMOS

04/04/2006

(757) 591-3519

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

Date

Daytime Phone #