


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 21, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000040256</b> 1. Entity Name <b>ARENA SIX, LLC</b>	
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Principal Place of Business <b>214 E LUCERNE CIR ORLANDO, FL 32801</b>	Mailing Address <b>214 E LUCERNE CIR ORLANDO, FL 32801</b>
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**DO NOT WRITE IN THIS SPACE**



01102008No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>57-1189976</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**G&L AGENT SERVICES, INC.  
ATTN: PRESIDENT  
390 N. ORANGE AVE., STE. 600  
ORLANDO, FL 32801**

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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 familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

U00000524470  
05/03/06-80115-009 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PAGE, GREGG 214 EAST LUCERNE CIR ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EICHENBLALT, STEVE 214 EAST LUCERNE CIR ORLANDO, FL 32801
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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:**  **2/02/06**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #