

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000041348

1. Entity Name  
BOCA CIEGA INVESTORS, LLC



Principal Place of Business  
ATTN: JOSEPH D. MITCHELL  
2851 REMINGTON GREEN CIRCLE, SUITE A  
TALLAHASSEE, FL 32308-3700

Mailing Address  
ATTN: JOSEPH D. MITCHELL  
2851 REMINGTON GREEN CIRCLE, SUITE A  
TALLAHASSEE, FL 32308-3700

**FILED**  
2006 MAR 15 AM 10:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



02022006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
51-0487570

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

PIERCE, ROBERT A  
227 SOUTH CALHOUN STREET  
TALLAHASSEE, FL 32301

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGRM  
NAME MITCHELL, JOSEPH D  
STREET ADDRESS 2851 REMINGTON GREEN CIRCLE  
CITY-ST-ZIP TALLAHASSEE, FL 323083700

TITLE MGRM  
NAME FARMER, C. GUY  
STREET ADDRESS 2851 REMINGTON GREEN CIRCLE  
CITY-ST-ZIP TALLAHASSEE, FL 323083700

TITLE  
NAME  
STREET ADDRESS  
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03/29/06--01008--019 \*\*50.00

**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: C. G. FARMER, Member 3/12/06 850-386-2522  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #