

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041611

Entity Name: FLORIDA ESTATE LLC

FILED
Jan 06, 2006
Secretary of State

Current Principal Place of Business:

1432 SW COURTYARDS LANE STE 101
CAPE CORAL, FL 33914

New Principal Place of Business:

POBOX 100773
CAPE CORAL, FL 33910

Current Mailing Address:

P.O. BOX 100773
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 20-0374851 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISCHER, ALEXANDRA M
1432 SW COURTYARDS LN 101
CAPE CORAL, FL 33914 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: MGR () Delete
Name: FISCHER, ALEXANDRA M
Address: 1432 SOUTHWEST COURTYARDS LANE SUTIE 101
City-St-Zip: CAPE CORAL, FL 33914

Title: MGR () Delete
Name: HAHN, JUERGEN
Address: 1432 SOUTHWEST COURTYARDS LANE, SUITE #101
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: FISCHER, ALEXANDRA M
Address: 1432 SOUTHWEST COURTYARDS LANE, SUITE #101
City-St-Zip: CAPE CORAL, FL 33914

Title: T () Delete
Name: HAHN, JUERGEN
Address: 1432 SOUTHWEST COURTYARDS LANE, SUITE #101
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FISCHER, ALEXANDRA M
Address: POBOX 100510
City-St-Zip: CAPE CORAL, FL 33910

Title: MGR (X) Change () Addition
Name: HAHN, JUERGEN
Address: POBOX 100510
City-St-Zip: CAPE CORAL, FL 33910

Title: S (X) Change () Addition
Name: FISCHER, ALEXANDRA M
Address: POBOX 100510
City-St-Zip: CAPE CORAL, FL 33910

Title: T (X) Change () Addition
Name: HAHN, JUERGEN
Address: POBOX 100510
City-St-Zip: CAPE CORAL, FL 33910

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: ALEXANDRA FISCHER

MGR

01/06/2006

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