

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056311

FILED
Apr 27, 2006
Secretary of State

Entity Name: LEE BOULEVARD OFFICE RETAIL LLC

Current Principal Place of Business:

24456 PEPPERCORN RD
PUNTA GORDA, FL 33955

New Principal Place of Business:

18191 PARKRIDGE CIR
FORT MYERS, FL 33908

Current Mailing Address:

PO BOX 152347
CAPE CORAL, FL 33915

New Mailing Address:

2235 FIRST ST
SUITE 111
FORT MYERS, FL 33901

FEI Number: 52-2418395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATEHAM, DAVID
24456 PEPPERCORN RD.
PUNTA GORDA, FL 33955 US

Name and Address of New Registered Agent:

HOOKE, ROSS
18191 PARKRIDGE CIR
FORT MYERS, FL 33908 US

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: W ROSS HOOKE

04/27/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete
Name: WELLMAN, JAMES
Address: 7100 TWIN EAGLE LANE
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM (X) Delete
Name: BATEHAM, DAVID
Address: 24456 PEPPERCORN RD
City-St-Zip: PUNTA GORDA, FL 33955

Title: MGRM () Delete
Name: RAFFEL, SPENCER
Address: 2011 SW 28TH LANE
City-St-Zip: CAPE CORAL, FL 33914

Title: MGRM () Delete
Name: MOSHER, ROBERT
Address: 14770 SOARING EAGLE CT
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: GARCZYNSKI, STANELY
Address: 14565 EAGLE RIDGE DR
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM () Delete
Name: HOOKE, ROSS
Address: 18191 PARKRIDGE CIR
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: RAFFEL, SPENCER
Address: P.O. BOX 152347
City-St-Zip: CAPE CORAL, FL 33915

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: W ROSS HOOKE

VP

04/27/2006

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