## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 21, 2006 8:00 am Secretary of State

DOCUMENT # L0400001107  1. I nitty Name GRAHAM FAMILY TRUST, L.L.C.					04-21-2006 90016 009 ****50.00			
Fencipal Plac	ce of Business	Mailing Address					-	
		932 DOLPHIN DRIVE JUPITER, FL 33458						
Principal Place of Business     3. Mailing Address								
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Suite, Apt. #, etc.		Suite, Apt. #, etc.		03242006	Chg-LLC	CR2E083 (11.	(05)	
City & State		City & State		4. FEI Numbe			Applied For Not Applicable	
/10	Country	Zip	Country			of Status Desired	□ \$5.00 Fee Re	Additional
l	6. Name and Address of Current	Registered Agent			7. Name and	Address of New Re		
DELICI MADTINIVE A				Name				
DELISI, MARTIN V E.A.   4361 NORTHLAKE BOULEVARD   PALM BEACH GARDENS, FL 33410			s	Street Address (P.O. Box Number is Not Acceptable)				
1-VEN DEV	ACH GARDENS, PL 33410							_
			C	City		<del></del>	FL Zip	Code
The above named entity submits this statement for the purpose of changing its registered office the obligations of registered agent.					ed agent, or bot	h, in the State of Flor	rida. I am familiar	with, and accept
	• •							
SICNATURE.	Signiture, typed or printed name of registered agent a	and title if applicable. (NOTE: I	Registered Age	ent signature required	when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2006							check payable Department of	
	MANAGING MEMBE	DE IMANIA GERS				ADDITIONS/	0	
9.		NOT MUNICIPALITY	10.				CHANGES	
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11. Thereby 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 shall have the same legal effect as if made under eath; 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: MILLEL Michael W. Graham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/19/06

561-641-0174 Daytime Phone #