

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006492

Entity Name: ARCADI ENTERPRISES L.L.C.

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

347 NE 544 STREET  
OLD TOWN, FL 32680

## New Principal Place of Business:

297 NE 544 STREET  
OLD TOWN, FL 32680

## Current Mailing Address:

347 NE 544 STREET  
OLD TOWN, FL 32680

## New Mailing Address:

297 NE 544 STREET  
OLD TOWN, FL 32680

FEI Number: 55-0857290      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

ARCADI, PATRICIA A  
347 NE 544 STREET  
OLD TOWN, FL 32680      US

## Name and Address of New Registered Agent:

ARCADI, PATRICIA A  
297 NE 544 STREET  
OLD TOWN, FL 32680      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: \_\_\_\_\_

05/01/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ARCADI, VINCENT J  
Address: 347 NE 544 STREET  
City-St-Zip: OLD TOWN, FL 32680

Title: MGRM ( ) Delete  
Name: ARCADI, PATRICIA A  
Address: 347 NE 544 STREET  
City-St-Zip: OLD TOWN, FL 32680

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ARCADI, VINCENT J  
Address: 297 NE 544 STREET  
City-St-Zip: OLD TOWN, FL 32680

Title: MGRM (X) Change ( ) Addition  
Name: ARCADI, PATRICIA A  
Address: 297 NE 544 STREET  
City-St-Zip: OLD TOWN, FL 32680

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: VINCENT J. ARCADI

MGR

05/01/2006

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