
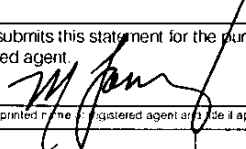
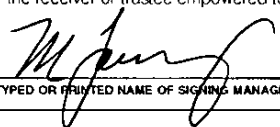


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90065 017 ****50.00

DOCUMENT # L04000013288					
1. Entity Name MANASOTA LANDHOLDINGS, LLC					
Principal Place of Business 45 COQUINA LN ENGLEWOOD, FL 34223			Mailing Address 45 COQUINA LN ENGLEWOOD, FL 34223		
2. Principal Place of Business 3332 NE 33rd St.		3. Mailing Address 3332 NE 33rd St			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale, FL			
Zip 33308		Country USA		4. FEI Number 54-2149684	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent TOMANY, MICHAEL A 45 COQUINA LN ENGLEWOOD, FL 34223			7. Name and Address of New Registered Agent Name Michael A. Tomany Street Address (P.O. Box Number is Not Acceptable) 3332 NE 33rd St. City Ft. Lauderdale FL Zip Code 33308		
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 		DATE 3/28/06			
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TOMANY, MICHAEL A 45 COQUINA LN ENGLEWOOD, FL 34223 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: 		Date 3/28/06 9545675775			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					