2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000016715

1. Entity Name
FORRESTER, HART & BELISLE, PL

Principal Place of Business	Mailing Address
1429 COLONIAL BLVD SUITE 201 FORT MYERS, FL 33907-1060	1429 COLONIAL BLVD SUITE 201 FORT MYERS, FL 33907-1060

DO NOT WRITE IN THIS SPACE

01232006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0819420
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

JAMES H. FORRESTER, P.A.
1429 COLONIAL BLVD
SUITE 201
FORT MYERS, FL 33907-1060

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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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	JAMES H. FORRESTER, P.A.
STREET ADDRESS	1429 COLONIAL BLVD, STE 201
CITY-ST-ZIP	FORT MYERS, FL 339071060
TITLE	MGR
NAME	ERIC M. BELISLE, PA
STREET ADDRESS	1429 COLONIAL BLVD. SUITE 201
CITY-ST-ZIP	FORT MYERS, FL 339071060
TITLE	MGR
NAME	RICHARD D. HART, PA
STREET ADDRESS	1429 COLONIAL BLVD. SUITE 201
CITY-ST-ZIP	FORT MYERS, FL 339071060
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: James H. Forrester 1/23/06 239-935-1188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #