# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L04000018771

1. Entity Name

NORTH HOWARD PROPERTIES, LLC



**FILED** May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

2101 WEST PLATT STREET SUITE 200

TAMPA, FL 33606

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SUITE 200

TAMPA, FL 33606



#### DO NOT WRITE IN THIS SPACE

01102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0846934 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

KOEHLER, KEITH W KOEHLER & COMPANY, P.A. 502 NORTH ARMENIA AVE TAMPA, FL 33609

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В.	The above named entity submits this statement for the purpose of changing its registered	I office or registered agent, or both	, in the State of Florida.	I am familiar with, and accept
	the obligations of registered agent.		**	

Signature, typed or printed name of registered agent and title if applicable.

(NOTE, Registered Agent signature required when reinstating)

DATE

## Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS	MGR GULUZIAN, ARAM 2101 WEST PLATT STREET, SUITE 200
City-ST-ZIP	TAMPA, FL 33606
NAME STREET ADDRESS CHY-ST-ZIP	MGR LUM, JOHN 2101 WEST PLATT STREET, SUITE 200 TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY ST-ZIP	
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11. I hereby 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 flability company or the receiver or typicses empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR PRICE

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