


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90018 009 \*\*\*\*50.00

<b>DOCUMENT # L04000023163</b>	
1. Entity Name METRO COMMERCE CENTER, LLC	

Principal Place of Business 11220-27 METRO PARKWAY FORT MYERS, FL 33912	Mailing Address 11220-27 METRO PARKWAY FORT MYERS, FL 33912
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**DO NOT WRITE IN THIS SPACE**



04242006No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0844709	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

KERVER, W. MICHAEL  
 11220 MERTO PARKWAY  
 SUITE 27  
 FORT MYERS, FL 33912

**DO NOT WRITE IN THIS SPACE**

7. 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)

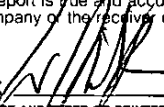
**Filing Fee is \$50.00 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ADVANCE PROPERTIES, INC. 4215 EAST 60TH STREET SUITE 6 DAVENPORT, IA 52807
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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:**  **W. MICHAEL KERVER** **4-24-06** **239-939-9996**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #