

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000027955

Entity Name: PEOPLE PREMIER 0902 LLC

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

2575 ULMERTON ROAD  
SUITE 350  
CLEARWATER, FL 337623365 US

## Current Mailing Address:

2575 ULMERTON ROAD  
SUITE 350  
CLEARWATER, FL 337623365 US

## New Principal Place of Business:

1000 118TH AVENUE NORTH  
SUITE 1000  
ST. PETERSBURG, FL 337162332 US

## New Mailing Address:

1000 118TH AVENUE NORTH  
SUITE 1000  
ST. PETERSBURG, FL 337162332 US

FEI Number: 13-4278026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KADOURA, BRUCE  
2575 ULMERTON ROAD  
SUITE 350  
CLEARWATER, FL 337623365 US

## Name and Address of New Registered Agent:

KADOURA, BRUCE  
1000 118TH AVENUE NORTH  
SUITE 1000  
ST. PETERSBURG, FL 337162332 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:

04/19/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SCHMIDT, DALE F  
Address: 2575 ULMERTON ROAD SUITE 350  
City-St-Zip: CLEARWATER, FL 337623365 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SCHMIDT, DALE F  
Address: 1000 118TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 337162332 US

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: DALE F SCHMIDT

MR

04/19/2006

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