## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED May 01, 2006 08:00 AM Secretary of State

1. Entity Nam	MENT # L04000 NCE REALTY AND IN		, LLC				Secreta	ıy oı	State	7	
Principal Place of Business Mailing Address 8021 S FEDERAL HIGHWAY 1 8021 S FEDERAL HIGHWAY PORT ST. LUCIE, FL 34952 US PORT ST. LUCIE, FL 34952					บร	A AMBRICARY MAY A	Bitt Bellt Belk bert beit	t arme were t	ROME STRUCK I MESSE I NA	### 411	
2. Principal Place of Business		3. Mailir	3. Mailing Address								
Suite, Apt. #, etc		Suite,	Suite, Apt. #, etc.			04062006	Chg-LLC	CR2E	083 (11/05)		
City & State		City &	City & State			4. FEI Number 27-0086				oplied For ot Applicable	
Zıp	Zip Country		Zip Country		ntry	5. Certificate o	f Status Desired	022	\$5.00 Add Fee Require		
· · · · · · · · · · · · · · · · · · ·	6. Name and Address of C	urrent Registered	Agent		Name	7. Name and A	ddress of New R	egistered .	Agent		
CROOKS, BERYL 8021 S FEDERAL HIGHWAY 1 PORT ST. LUCIE, FL 34952			- -			P.O. Box Number	is Not Acceptable	}		·	
					City			FL	Zip Cod	8	
8. The above the obligat	named entity submits this state tions of registered agent.	ment for the purpor	se of changing its	registere	ed office or registe	red agent, or both	, in the State of Flo	rida. I am	familiar with,	and accept	
SIGNATURE	Signature, typed or printed name of register	red agent and life it appro	SDIS SIDS	E: flegistere	d Agent signature requires	f when reinstating;	<del></del>	DATE			
Filing Fee is \$50.00 Due by May 1, 2006							<b>→</b> .		Make check payable to Florida Department of State		
Fi D	iling Fee is \$50.00 ue by May 1, 2006									8	
9.	MANAGING	MEMBERS/MANAC		10.				Departm	ent of State	9	
		AY 1	GERS Delete	10. Tulle Nam Stre	- (		Florida	Departm	Change	☐ Addition	
9. Site Name Street Address	MANAGING MAN	AY 1		10. TULE NAM STRE CITY TULE NAM STRE	E EET ADORESS SI-719		Florida ADDITIONS/	Departm	Change	☐ Addition	
9. SITLE NAME STREET ADDRESS CITY-S7-ZIP TITLE NAME STREET ADDRESS	MANAGING MAN	AY 1	☐ Delete	TO. TOTALE NAME STREE STREET NAME STREET N	E E E ADDRESS - ST-ZIP E E - ST-ZIP E E		Florida ADDITIONS/	Departm	Change	□ Addition	
9. SITLE SAME STREET ADDRESS CTTY-ST-ZIP HILE NAME STREET ADDRESS CTTY-ST-ZIP HILE NAME STREET ADDRESS STREET ADDRESS	MANAGING MAN	AY 1	□ Delete	TO. TULE NAME STREE CITY TITLE NAME STREE NAME STREE CUTY TITLE NAME STREE NAME STREE NAME STREE	E E E E E E E E E E E E E E E E E E E		Florida ADDITIONS/	Departm	Change	Addition  5. 00  Addition	
9.  SITLE SAME STREET ADDRESS CHY-SI-ZIP HILE NAME STREET ADDRESS STREET ADDRESS	MANAGING MAN	AY 1	Delete  Delete	TO. TOTALE NAME STREET NAME NAME STREET NAME NAME NAME STREET NAME NAME STREET NAME NAME STREET NAME NAME STREET NAME STREET NAME STREET NAME STREET NAME STREET NAME NAME STREET NAME STR	E ET ADDRESS - SI-ZIP E E ELFI ADDRESS - SI-ZIP E E E E ADDRESS - SI-ZIP E E E ADDRESS - SI-ZIP E E E ADDRESS		Florida ADDITIONS/	Departm	Change	Addition  Addition  Addition	
9.  SITLE STAME STREET ADDRESS CITY-S1-2IP HILE NAME STREET ADDRESS CITY-S1-ZIP	MANAGING MAN	AY 1 52 —	Delete Delete Delete Delete Delete	TO. TULLE NAME STREE CITY THEE NAME STREE CITY	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP		ADDITIONS/I	Departm CHANGES	Change  Change  Change  Change	Addition  Addition  Addition  Addition  Addition	

Indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

-,21.06 772-344-32

Ozytma Phone