


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**May 25, 2006 8:00 am  
Secretary of State**

04-26-2006 90016 017 \*\*\*\*50.00

<b>DOCUMENT # L04000029244</b> 1. Entity Name <b>CARMANY HOLDINGS, LLC</b>	
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Principal Place of Business <b>925 FLORIDA CENTRAL PARKWAY LONGWOOD, FL 32750</b>	Mailing Address <b>925 FLORIDA CENTRAL PARKWAY LONGWOOD, FL 32750</b>
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**DO NOT WRITE IN THIS SPACE**



01302008 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>20-2884903</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**LOWMAN, WILLIAM R JR.  
1000 LEGION PLACE, SUITE 1700  
ORLANDO, FL 32801**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
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 CITY - ST - ZIP	<b>MGR CARMANY, JOEL R 925 FLORIDA CENTRAL PKWY LONGWOOD, FL 32750</b>
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**DO NOT WRITE  
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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: *Joel Carmany*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #