

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000030132

FILED
Aug 21, 2006
Secretary of State**Entity Name:** OCALA PROPERTIES, LLC**Current Principal Place of Business:**2800 NORTH OCEAN DRIVE
HOLLYWOOD, FL 33019 US**New Principal Place of Business:****Current Mailing Address:**10130 NORTHLAKE BLVD
SUITE 214-329
WEST PALM BEACH, FL 33412 US**New Mailing Address:****FEI Number:** 01-0814022 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CHOYNOWSKI, JOHN F MR
10354 OSPREY TRACE
WEST PALM BEACH, FL 33412 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGR () Delete
Name: CHOYNOWSKI, JOHN F
Address: 10354 OSPREY TRACE
City-St-Zip: WEST PALM BEACH, FL 33412**Title:** MGRM () Delete
Name: CONTINI LIMITED PART, NERSHIP
Address: 5723 HIGH FLYER ROAD
City-St-Zip: PALM BEACH GARDENS, FL 33418**Title:** MGRM (X) Delete
Name: J.M.T. LLC,
Address: 10354 OSPREY TRACE
City-St-Zip: WEST PALM BEACH, FL 33412**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN F CHOYNOWSKI MGR 08/21/2006

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